

## Bundle HEIW Board (Open) 24 September 2020

### AGENDA

Agenda (Open) Board September 2020 V7.docx

- 1 PART ONE - PRELIMINARY MATTERS
- 1.1 Welcome and Introductions
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  - 4.2b - Integrated Performance Report September 2020 (final).docx
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- 4.4 Replacement of Specific Sections of the Statutes and Ordinances with Equivalent NHS Wales Policy(ies) covering Disciplinary, Capability, Grievance and Dignity at Work
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- 4.6 To receive key issue reports from:
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5.1 Any Other Urgent Business

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5.3 Dates of Next Meetings:

5.3.1 • HEIW Board Development Session to be held on 29 October 2020 to be confirmed either via Microsoft Teams/Teleconference or to be held in Ty Dysgu, Nantgarw

5.3.2 • HEIW Board to be held on 26 November 2020 to be confirmed either via Zoom/Teleconference or to be held in Ty Dysgu, Nantgarw

## HEALTH EDUCATION AND IMPROVEMENT WALES (HEIW)

**Board Meeting – 09:30am-11:30am**

**to be held on Thursday, 24 September 2020**  
**Via Zoom/Teleconference**

### AGENDA

<b>PART 1</b>	<b>PRELIMINARY MATTERS</b>	<b>09:30-09:40</b>
1.1	Welcome and Introductions	Chair/Oral
1.2	Apologies for Absence	Chair/Oral
1.3	Declaration of interests	Chair/Oral
1.4	To receive and confirm the minutes of the Board held on 30 July 2020	Chair/ Attachment
1.5	Action Log	Chair/ Attachment
1.6	Matters Arising: <ul style="list-style-type: none"> <li>Review the Requirement to Extend the Term for Holding Electronic Conference Meetings</li> </ul>	Chair/ Oral
<b>PART 2</b>	<b>CHAIR AND CHIEF EXECUTIVE REPORTS</b>	<b>09:40-09:50</b>
2.1	Chair's Report	Chair/ Attachment
2.2	Chief Executive's Report	Chief Executive/ Attachment
<b>PART 3</b>	<b>STRATEGIC ITEMS</b>	<b>09:50-10:30</b>
3.1	Approval of Education Contract Specification	Interim Director of Nursing/ Director of Finance/ Attachment
3.2	Strategic Equality Plan	Director of Workforce & OD/ Attachment
<b>PART 4</b>	<b>GOVERNANCE, PERFORMANCE AND ASSURANCE</b>	<b>10:30-11:25</b>
4.1	Director of Finance Report	Director of Finance/ Attachment
4.2	Performance Report	Director of Workforce & OD/ Attachment
4.3	Corporate Risk Register	Board Secretary/ Attachment

4.4	Replacement of specific sections of the Statutes and Ordinances with equivalent NHS Wales policy(ies) covering Disciplinary, Capability, Grievance and Dignity at Work	Director of Workforce & OD/ Attachment
4.5	Review of Committee Membership	Board Secretary/ Attachment
4.6	To receive key issue report from the: <ul style="list-style-type: none"> <li>Education, Commissioning &amp; Quality Committee held on 16 September 2020</li> </ul>	Chair of the Committee/ Attachment
4.7	In-Committee Decisions	Board Secretary/ Attachment
<b>PART 5</b>	<b>OTHER MATTERS</b>	<b>11:25-11:30</b>
5.1	Any other urgent business	Chair/Oral
5.2	Summary of key actions	Chair/Oral
5.3	Dates of Next Meetings: <ul style="list-style-type: none"> <li>HEIW <b>Board Development Session</b> to be held on <b>29 October 2020</b> to be confirmed either via Microsoft Teams/Teleconference or to be held in Ty Dysgu, Nantgarw</li> <li>HEIW <b>Board</b> to be held on <b>26 November 2020</b> to be confirmed either via Zoom/Teleconference or to be held in Ty Dysgu, Nantgarw</li> </ul>	

In accordance with the provision of Section 1(2) of the Public Bodies (Admissions to Meetings) Act 1960 it shall be resolved that representatives of the press and other members of the public be excluded from the latter part of the meeting on the grounds that it would be prejudicial to the public interest due to the confidential nature of the business transacted. This section of the meeting is to be held in private session.

**DRAFT Unconfirmed Minutes of the HEIW Board Meeting**  
**held on 30 July 2020 at 10:00 am**  
**via Zoom/Teleconference**

**Present:**

Dr Chris Jones	Chair
John Hill-Tout	Vice Chair, Independent Member
Tina Donnelly	Independent Member
Dr Ruth Hall	Independent Member
Gill Lewis	Independent Member
Professor Ceri Phillips	Independent Member
Dr Heidi Phillips	Independent Member
Alex Howells	Chief Executive
Professor Pushpinder Mangat	Medical Director
Angela Parry	Interim Director of Nursing
Eifion Williams	Director of Finance

**In attendance:**

Dafydd Bebb	Board Secretary
Angie Oliver	Deputy Director of Workforce and OD
Huw Owen	Welsh Translation Manager
Clare James	Audit Wales (Observer)
Kay Barrow	Corporate Governance Manager (Secretariat)

<b>PART 1</b>	<b>PRELIMINARY MATTERS</b>	<b>Action</b>
<b>3007/1.1</b>	<b>Welcome and Introductions</b>	
	The Chair welcomed everybody to the meeting of the HEIW Board. He also welcomed Angie Oliver (Deputy Director of Workforce and OD) who was attending for Julie Rogers, and Huw Owen (Welsh Translation Manager). A quorum was confirmed present.	
<b>3007/1.2</b>	<b>Apologies for Absence</b>	
	Apologies were received from Julie Rogers (Director of Workforce and OD).	
<b>3007/1.3</b>	<b>Declarations of Interest</b>	
	There were no declarations of interest.	
<b>3007/1.4</b>	<b>Minutes of the Board meeting held on 25 June 2020</b>	
	The minutes of the Board meeting held on 25 June 2020 were <b>received</b> and <b>approved</b> as an accurate record of the meeting, subject to the amendment of the date of the meeting from 26 to 25 June 2020 and the corresponding minute references updated to reflect that change.	<b>DB</b>

<b>3007/1.5</b>	<b>Action Log</b>	
	<p>The Board <b>received</b> and <b>considered</b> the Action Log from the meeting held on 25 June 2020. It was highlighted that the majority of actions were complete or had been added to the forward work programme. A verbal update was received for the following action:</p> <ul style="list-style-type: none"> <li>• <b>2506/2.6 Month 2 Finance Report:</b> It was confirmed that the feedback from the Directorate budget meetings and the Welsh Government finance meeting were covered under the section on the 'Forward Look' in the Director of Finance Report included on the agenda.</li> </ul>	
	The Board <b>noted</b> the Action Log and verbal update.	
<b>3007/1.6</b>	<b>Matters Arising</b>	
	There were not matters arising.	
<b>3007/2</b>	<b>CHAIR AND CHIEF EXECUTIVE REPORTS</b>	
<b>3007/2.1</b>	<b>Chair's Report</b>	
	<p>The Board <b>received</b> the report.</p> <p>The Chair welcomed the full return of Alex Howells, Chief Executive following her supporting role at Welsh Government in response to the COVID 19 Pandemic.</p> <p>The Chair wished to formally thank Julie Rogers, the Executive Team and the wider organisation for their hard work and support during this difficult and challenging period.</p> <p>The Chair praised the staff who had temporarily supported the frontline NHS workforce in response to the COVID 19 Pandemic. He was also mindful of HEIW's duty of care to all staff during the lockdown and commended the work undertaken by the Workforce &amp; OD Directorate in the development of the online wellbeing resources which had been rolled out widely within NHS Wales.</p> <p>The frequency of meetings with Welsh Government colleagues had now moved from weekly to monthly. This was a time for the NHS to reflect on lessons learnt and prepare to move to working in the 'new normal'. The operational plans over the next few months would bring HEIW back into delivering its strategic objectives as set out in the IMTP.</p> <p>Good communication had been maintained with the Board members, the Executive Team and Senior Managers to keep abreast of the education, training and workforce challenges. The Chair was pleased with how the organisation had responded to issues and the work being undertaken with education providers and key stakeholders.</p>	

	<p>The Chair announced the appointment of Nicola Johnson as Director of Planning, Performance and Corporate Services who would be commencing in her role in September 2020.</p> <p>The Health and Social Care (Quality and Engagement) (Wales) Act became law on 1 June 2020 and there was a need for HEIW to further embed and enhance its overriding aims and purpose. The development of the Workforce Strategy for Health &amp; Social Care would stand HEIW in good stead to continue to develop and build on its relationship and learning with Social Care Wales colleagues.</p> <p>The Chair thanked all HEIW staff and, particularly the Communications Team and IT/Digital Department for keeping staff members connected and informed.</p>	
<b>Resolved</b>	The Board <b>noted</b> the report.	
<b>3007/2.2</b>	<b>Chief Executive's Report</b>	
	<p>The Board <b>received</b> the report.</p> <p>In presenting the report, Alex Howells advised that HEIW had been fortunate during the lockdown restrictions for staff to have the necessary IT capability for homeworking. She explained that Ty Dysgu had reopened on 9 July 2020 to allow staff the option to work in the office. A lot of work had been undertaken to make the building safe for staff to use which included extensive social distancing measures. Recent data on the usage of the building since reopening showed that around 10-20 staff were on site each day although, up to 50 staff could safely work. However, further work was required to increase the capacity within Ty Dysgu, particularly for meeting facilities to allow the benefit of more staff face to face interaction. Alex Howells thanked the Planning Team for the work undertaken in making Ty Dysgu a safe working environment.</p> <p>Communication channels with staff had been maintained with a two-weekly staff bulletin and utilising Microsoft Teams for the Open Staff Forum which had attracted around 90 attendees.</p> <p>Stakeholder Bulletins continued with the most recent one focusing on the changes to education and training, and how HEIW would be resetting its more routine ways of working. A review was to be undertaken to strengthen HEIW's stakeholder engagement and maximise the relationships that had been developed over recent months.</p> <p>HEIW was actively involved in the continued response to COVID 19 and developing its emergency response plans for Welsh Government. The quarterly Operational Plans were focused on HEIW returning to its priority activities particularly those relating to endoscopy, cancer and unscheduled care. A number of useful papers had been recently considered by the Executive Team on</p>	

	<p>areas such as making a digital ready workforce, simulation and exploring the quality research agenda. The next iteration of the Operational Plan was scheduled for September 2020 and would include a number of items for consideration as part of ongoing Board Development Sessions.</p> <p>The Board was pleased to see the increased focus with Social Care and the exploration of healthcare training for care workers.</p>	
<b>Resolved</b>	The Board <b>noted</b> the report.	
<b>3007/3</b>	<b>STRATEGIC ITEMS</b>	
<b>3007/3.1</b>	<b>HEIW Quarter 2 Operational Plan and Response to COVID 19</b>	
	<p>The Board <b>received</b> the Q2 Operational Plan.</p> <p>In presenting the Plan, Angie Oliver advised that the Plan detailed the activities undertaken in response to COVID 19 and the approach to resetting activities by the rephrasing of the IMTP objectives and deliverables both within HEIW and the support to the wider NHS workforce system.</p> <p>Positive feedback had been received following a meeting held with Welsh Government on the Q2 Operational Plan. This noted the good progress being made and the areas for ongoing discussion. A review of the capacity to deliver the projects and programmes to meet the milestones and objectives was being undertaken.</p> <p>It was clarified that Public Health Wales was undertaking the training for the Welsh Government's Test, Trace and Protect programme.</p> <p>The next iteration of the Operation Plan was expected for the end of September 2020 and would include Winter resilience planning.</p>	
<b>Resolved</b>	The Board <b>approved</b> the draft Q2 Operational Plan submitted to Welsh Government on 3 July 2020.	
<b>3007/3.2</b>	<b>Annual Education and Training Plan 2021/22</b>	
	<p>The Board <b>received</b> the Annual Education and Training Plan 2021/22.</p> <p>In presenting the report, Angela Parry highlighted that extensive engagement had taken place with a wide range of key stakeholders. The Plan had been developed based on HEIW's assessment of the NHS workforce training needs for health and social care based largely on IMTPs. The required investment for 2021/22 was £227.901m and supported the improvements to develop extended skills and advanced practice. It strengthened the skills, knowledge and ability of the workforce, as well as increasing numbers to fill vacancies and meet population needs.</p> <p>The Plan had been presented at NHS Executive Board and had received positive feedback and was approved. The ECQC had also</p>	

	<p>considered the Plan in detail in the context of the Strategic Review and the key drivers.</p> <p>The Board considered the Plan and was cognisant of the continuing shift in service delivery models from secondary to primary care, and the need for NHS organisations and Local Authorities to redesign their workforce to meet the changing service demands.</p> <p>It was confirmed that the implementation of the continued increase in education and training should have a beneficial effect on agency use over the next few years. The streamlining mechanisms and two-year bursary tie in supported this.</p> <p>A question was raised about the measures being undertaken to ensure sufficient numbers were being trained to meet future service needs. It was confirmed that work was ongoing with a number of initiatives to build and implement a range of 'grow your own' schemes to address shortages in the workforce. This included widening access to education and training with innovative approaches to flexible programmes including work-based learning and apprenticeships to encourage educational attainment.</p> <p>It was also highlighted that the Board was keen to expand the use of the Welsh language and increasing the delivery of education and training through the medium of Welsh.</p> <p>The Board thanked Angela Parry and her team for their hard work in developing the Plan and the Education, Commissioning &amp; Quality Committee for its scrutiny.</p>	
<b>Resolved</b>	The Board <b>agreed</b> to recommend the Annual Education and Training Plan for 2021/22 to the Welsh Government for approval.	<b>AP</b>
<b>3007/4</b>	<b>GOVERNANCE, PERFORMANCE AND ASSURANCE</b>	
<b>3007/4.1</b>	<b>Director of Finance Report</b>	
	<p>The Board <b>received</b> the report.</p> <p>In presenting the report, Eifion Williams provided an update in relation to the month 3 financial position for 2020/2021 which was a year to date underspend of £982k. This was an increase in the underspend position of £295k compared to the previous month.</p> <p>COVID 19 has had a significant impact into Q2. A 'deep dive' had been undertaken at the end of month 3 in order to better understand the nature and extent of the underspend positions within Directorates. The key reasons for the underspend variances were vacancies against budgeted staffing levels for pay budgets and lower placements than planned in commissioned training placements budgets.</p>	

	<p>It was highlighted that the Finance Team would ensure that a cash balance of £100k was maintained within the bank and to only draw down what was required in line with projected cash requirements. Compliance with the PSPP (Public Sector Payment Policy) at the end of Q1 2020/2021 was 87.8%. This was in the main due to a delay in the payment of a number of low value university invoices not matched to a purchase order. A revised process had been implemented to aggregate low value invoices from the same provider to speed up the processing time. However, there was a risk with the recovery of the target by the year end.</p> <p>In terms of the resource plan for 2020/2021, it was highlighted that at this point in the financial year the anticipated underspend position could be at least £5m by the year end. There was a further risk that this underspend could grow further but was dependent on recruitment to courses in September 2020. The key drivers for the underspend position were predominantly as a result of the impact delays in course commencement; under recruitment of students and the reduced take up of the bursary. However, some of the underspend position could be offset by the additional costs incurred as a result of COVID 19 and new commitments/initiatives. This would leave HEIW with a net position of £4m underspend at the year end. Following discussions with Welsh Government colleagues, it was proposed that HEIW return £4m to Welsh Government and that the £600k development monies carried forward from 2019/2020 should be carried forward into 2021/22 as it was unlikely to be spent this financial year.</p> <p>The Board considered the report, recognising that a lot of work had been undertaken to minimise the underspend position. However, concern was raised regarding the impact of the reduction in the bursary uptake. A 'deep dive' was suggested to review the reasons for students opting to self-finance versus bursary uptake.</p> <p>It was clarified that the financial position supported the full recruitment into all education and training programmes. Whilst under recruitment was a concern, it was highlighted that during August work would be undertaken to raise the profile of health professions and opportunities to widen access for educational attainment.</p>	
<b>Resolved</b>	<p>The Board:</p> <ul style="list-style-type: none"> <li>• <b>noted</b> the report;</li> <li>• <b>agreed</b> that the Education, Commissioning and Quality Committee undertake analysis of the 'deep dive' in relation to the reduction in bursary uptake;</li> <li>• <b>approved</b> the return of £3.8m of resource to Welsh Government in 2020/21.</li> <li>• <b>approved</b> the re-purposing of £1m of available resource to address new commitments anticipated in the current year.</li> </ul>	<p><b>AP/EW</b></p> <p><b>EW</b></p> <p><b>EW</b></p>

	<ul style="list-style-type: none"> <li>• <b>approved</b> the transfer forward of £0.6m of development funds into the 2021/22 financial year.</li> </ul>	<b>EW</b>
<b>3007/4.2</b>	<b>Performance Report</b>	
	<p>The Board <b>received</b> the report.</p> <p>In presenting the report, Angie Oliver highlighted that the reporting format differed for this period due to additional requirements for COVID 19 reporting. Good progress had been made during Q1 and there were no significant performance concerns to report despite the change to planned work and implementation of new ways of working.</p> <p>Since the report was written, it was highlighted that there was one performance issue to highlight. This related to the lower than anticipated recruitment to the clinical endoscopy training programme. However, a number of governance improvement measures were being implemented to help address this to bring it back on track. It was highlighted that HEIW had recruited Simulation Leads who would assist in the development of a simulation strategy to complement traditional ways of learning.</p> <p>The Board received an update regarding the current fill rates for GP training and was pleased to hear about the significant numbers that had been recruited which were in excess of those anticipated. The fill rates for medical core and early specialty training were the highest in the UK with over 99% of the 245 posts recruited into.</p> <p>The Board considered the report and it was clarified that the access to the Wellbeing, Leadership and Multi-Professional Resources on the website had been extended across Wales. Analysis of the number of 'hits' would be explored however; the high number of hits could be attributable to a combination of resources and signposting available on the website.</p>	
<b>Resolved</b>	The Board <b>noted</b> the report.	
<b>3007/4.3</b>	<b>Risk Management Policy</b>	
	<p>The Board <b>received</b> the Risk Management Policy.</p> <p>In presenting the Policy, Dafydd Bebb highlighted that a number of revisions had been made to address a number of the recommendations highlighted from the Risk Management Internal Audit Report and the Audit Wales 2019 Structured Assessment.</p> <p>The revised policy had been considered by the Audit &amp; Assurance Committee on 16 July 2020 and recommended to the Board for approval.</p>	
<b>Resolved</b>	The Board <b>approved</b> the revisions to the Risk Management Policy for implementation.	

<b>3007/4.4</b>	<b>Temporary Amendments to the Standing Orders</b>	
	<p>The Board <b>received</b> the report.</p> <p>In presenting the report, Dafydd Bebb advised that, in response to the COVID pandemic, the Welsh Health Circular “Temporary Amendments to Model Standing Orders, Reservation and Delegation of Powers” was directing HEIW to amend its Standing Orders in accordance with the circular and the National Health Service (Temporary Disapplication of Tenure of Office) (Wales) (Coronavirus) Regulations 2020 (“the Regulations”). The temporary amendments to HEIW’s Standing Orders related to:</p> <ul style="list-style-type: none"> <li>• Extending the deadline for holding the Annual General Meeting (AGM) to 30 November 2020;</li> <li>• Extending the maximum tenure for an Independent Member.</li> </ul> <p>It was highlighted that HEIW would be holding its AGM on 24 September 2020 which was in accordance with its current Standing Orders. In terms of the amendment to extend the maximum tenure for an Independent Member, it was highlighted that this would have limited scope for HEIW as all Independent Members were initially appointed in 2018. The amendments were time limited and would cease on 31 March 2021.</p> <p>The temporary amendments had been considered by the Audit &amp; Assurance Committee on 16 July 2020 and recommended to the Board for approval.</p>	
<b>Resolved</b>	The Board <b>approved</b> the temporary amendments to its Standing Orders.	
<b>3007/4.5</b>	<b>Health and Social Care (Quality and Engagement) (Wales) Act</b>	
	<p>The Board <b>received</b> the report.</p> <p>In presenting the report, Dafydd Bebb confirmed that the Health and Social Care (Quality and Engagement) (Wales) Act 2020 became law in Wales on 1 June 2020. He outlined the implications of the Act for HEIW.</p> <p>As part of the Duty of Quality, HEIW would be required to produce an Annual Report detailing its quality improvements. However, the Duty of Candour was patient focussed and, although this aspect did not apply in HEIW’s case from a technical perspective, HEIW would embed the values of the Act into its education, training and leadership principles.</p>	
<b>Resolved</b>	The Board <b>noted</b> the report.	
<b>3007/4.6</b>	<b>Key Issue Reports from the:</b>	
<b>3007/4.6.1</b>	<b>Audit &amp; Assurance Committees held on 23 June 2020 and 16 July 2020</b>	
	The Board <b>received</b> the report.	

	<p>In presenting the report, Gill Lewis advised that both Committee meetings had been held by virtual means and, following each meeting, a Committee briefing, and the unconfirmed minutes had been published on the website.</p> <p>The Board received a brief overview of the items considered by the Committee at both meetings. These included the following items that had been recommended to the Board for approval:</p> <ul style="list-style-type: none"> <li>• Accountability Report;</li> <li>• Final Annual Accounts;</li> <li>• Temporary amendments to HEIW's Standing Orders;</li> <li>• Risk Management Policy.</li> </ul> <p>The items had subsequently been considered and approved by the Board.</p>	
<b>Resolved</b>	The Board <b>noted</b> the report.	
<b>3007/4.6.2</b>	<b>Education, Commissioning &amp; Quality Committee held on 2 July 2020</b>	
	<p>The Board <b>received</b> the report.</p> <p>In presenting the report, Ruth Hall confirmed that the Committee had been held virtually and that a Committee briefing, and the unconfirmed minutes had been published on the website.</p> <p>The Board received a brief overview of the items considered by the Committee at the meeting held on 2 July 2020, which included the approval of its Annual Report that was a separate item on the Board agenda.</p>	
<b>Resolved</b>	The Board <b>noted</b> the report.	
<b>3007/4.7</b>	<b>Education, Commissioning &amp; Quality Committee Annual Report 2019/2020</b>	
	<p>The Board <b>received</b> the Annual Report.</p> <p>In presenting the report, Ruth Hall advised that the report summarised the key areas of business activity undertaken by the Committee during 2019/2020 and highlighted some of the key issues which the Committee intended to consider over the next 12 months.</p> <p>The Committee wished to formally record its thanks Stephen Griffiths for his hard work and the support provided to the Committee.</p> <p>The Board welcomed the report and for its wider availability to staff.</p>	
<b>Resolved</b>	<p>The Board:</p> <ul style="list-style-type: none"> <li>• <b>noted</b> the report for assurance purposes;</li> <li>• <b>agreed</b> for the wider availability of the report for staff and for its publication on the HEIW intranet.</li> </ul>	<b>DB</b>

<b>3007/4.8</b>	<b>Procurement Compliance Annual Report 2019/2020</b>	
	<p>The Board <b>received</b> the report.</p> <p>In presenting the Annual Report, Eifion Williams highlighted that the report provided an overview of the procurement activity undertaken for the period 1 April 2019 to 31 March 2020. He explained that a number of areas of concern had been highlighted during the year by Procurement, where adherence to procurement processes were not followed. These areas have been targeted by Procurement for focused work to ensure correct processes was being adhered to and would continue to be monitored.</p>	
<b>Resolved</b>	The Board <b>noted</b> the report.	
<b>3007/4.9</b>	<b>In Committee Decisions</b>	
	The Board <b>received</b> and <b>noted</b> the report which provided the key issues discussed 'in committee' at the June Board meeting.	
<b>3007/4.10</b>	<b>Forward Work Programme 2020/2021</b>	
	The Board <b>received</b> and <b>noted</b> its Forward Work Programme for the remainder of 2020/21.	
<b>3007/5</b>	<b>OTHER MATTERS</b>	
<b>3007/5.1</b>	<b>Any Other Urgent Business</b>	
<b>3007/5.1.1</b>	<b>Extension to the Term for Holding Electronic Conference Meetings</b>	
	<p>The Board <b>considered</b> extending the term for holding the Board and Committee meetings virtually until the end of September 2020.</p> <p>The Chair proposed that the deadline for issuing the briefings following Board and Committee meetings be extended from 48 hours to 4 working days.</p>	
<b>Resolved</b>	<p>The Board:</p> <ul style="list-style-type: none"> <li>• <b>approved</b> extending the term for holding virtual meetings to the end of September 2020;</li> <li>• <b>approved</b> the revised deadline of four working days for issuing a briefing following a Board or Committee meeting.</li> </ul>	
<b>3007/5.2</b>	<b>Summary of Key Actions</b>	
	The Board reflected on the first Board meeting undertaken using 'Zoom' and the difficulties with the translation service. Further work would be undertaken to resolve the issues.	
<b>3007/5.3</b>	<b>Date of Next Meetings</b>	
	<p>The Board <b>received</b> and <b>noted</b> the forthcoming Board dates:</p> <ul style="list-style-type: none"> <li>• <b>HEIW Board Development Session</b> to be held on <b>27 August 2020</b> to be confirmed either via Microsoft Teams/Teleconference or in Ty Dysgu, Nantgarw</li> <li>• <b>HEIW Board</b> to be held on <b>24 September 2020</b> to be confirmed either via Zoom/Teleconference or to be held in Ty Dysgu, Nantgarw</li> </ul>	

<b>3007/5.4</b>	<b>Close</b>	
	There being no other urgent business for the open session the meeting moved into the closed session.	

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Chris Jones (Chairman)

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Date:

DRAFT

**HEIW Board (Open)**  
**30 July 2020**  
**Action Log**

(The Action Sheet also includes actions agreed at previous meetings of the Open HEIW Board and are awaiting completion or are timetabled for future consideration for the Board. These are shaded in the first section. When signed off by the Board these actions will be taken off the rolling action sheet.)

Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
<b>2805/4.5</b>	<b>Amendment to the Delegated Financial Limits/Standing Orders</b>			
	<ul style="list-style-type: none"> <li>The agreed Amendment to the Delegated Financial Limits/Standing Orders to be reviewed by the end of August 2020.</li> </ul>	<b>Board Secretary</b>	November 2020	Added to the Audit & Assurance Committee Forward Work Programme for October 2020. Added to the Board Forward Work Programme for November 2020.
<b>3007/1.4</b>	<b>Minutes of the Board Meeting held on 25 June</b>			
	<ul style="list-style-type: none"> <li>The date of the meeting to amended from 26 to 25 June 2020 and the corresponding minute references updated to reflect that change.</li> </ul>	<b>Board Secretary</b>	Within 1 week	Completed.
<b>3007/3.2</b>	<b>Annual Education and Training Plan 2021/22</b>			
	<ul style="list-style-type: none"> <li>HEIW to recommend to Welsh Government to approve the Annual Education and Training Plan for 2021/22.</li> </ul>	<b>Interim Director of Nursing</b>	End of July 2020	The Annual Education and Training Plan was submitted to Welsh Government at the end of July following the Board recommendation and support. Alex Howells wrote formally to Andrew Goodall as a follow up to the Plan being received at NHS Executive Board.

Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
<b>3007/4.1</b>	<b>Director of Finance Report</b>			
	<ul style="list-style-type: none"> <li>The Education, Commissioning and Quality Committee to undertake analysis of the 'deep dive' in relation to the reduction in bursary uptake.</li> </ul>	<b>Interim Director of Nursing/ Director of Finance</b>	October 2020	The preliminary findings from the deep dive into the AHP bursary tie-in was received by the Executive on 10.09.20. HEIW have put in place an Enhanced Monitoring Process for Bursary Appeals and related matters. This process is formalised through a weekly meeting chaired by Julie Rogers on behalf of Alex Howells. The preliminary report and subsequent matters will be presented to the Education, Commissioning & Quality Committee at the October meeting.
	<ul style="list-style-type: none"> <li>£3.8m of resource to be returned to Welsh Government in 2020/21.</li> </ul>	<b>Director of Finance</b>	Completed	Completed
	<ul style="list-style-type: none"> <li>The re-purposing of £1m of available resource to address new commitments anticipated in the current year.</li> </ul>	<b>Director of Finance</b>	Completed	Completed
	<ul style="list-style-type: none"> <li>The transfer forward of £0.6m of development funds into the 2021/22 financial year.</li> </ul>	<b>Director of Finance</b>	Completed	Completed
<b>3007/4.7</b>	<b>Education, Commissioning &amp; Quality Committee Annual Report 2019/2020</b>			
	<ul style="list-style-type: none"> <li>The Education, Commissioning &amp; Quality Committee Annual Report to be made available to staff and published on the HEIW intranet</li> </ul>	<b>Board Secretary</b>	Within 2 weeks	Completed.





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<b>Meeting Date</b>	<b>24 September 2020</b>	<b>Agenda Item</b>	<b>2.1</b>
<b>Report Title</b>	<b>Chair's Report</b>		
<b>Report Author</b>	Dr Chris Jones, Chairman		
<b>Report Sponsor</b>	Dr Chris Jones, Chairman		
<b>Presented by</b>	Dr Chris Jones, Chairman		
<b>Freedom of information</b>	Open		
<b>Purpose of the report</b>	To provide the Board with an overview of the work undertaken by the Chair, Vice Chair and the Chairs of the Audit and Assurance Committee and the Education Commissioning and Quality Committee during the reporting period.		
<b>Key issues</b>	The report identifies a range of work identified by the Chair and also seeks ratification of a Chair's Action.		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			<b>Approval</b> ✓
<b>Specific action required</b>	Members are asked to: <ul style="list-style-type: none"> <li>note the range of work highlighted by the Chair and; to ratify the Chair's Action outlined in paragraph 3 of the report.</li> </ul>		

## **CHAIR'S REPORT**

### **1. PURPOSE OF REPORT**

The purpose of this report is to update the Board on the range of activities and meetings undertaken by the HEIW Chairman, Vice Chair and Chairs of the Audit & Assurance Committee and Education, Commissioning & Quality Committee since the last Board meeting. The report also seeks the ratification of a Chair's Action.

### **2. CHAIRMAN'S ACTIVITIES AND MEETINGS**

Today we are again livestreaming the Board Meeting. This enables the public to observe today's Board meeting through livestreaming technology. We are also using the technology to enable Welsh / English translation. Later today we will be holding our Annual General Meeting followed by a showcase Webinar. I am sure the contributions will be really informative and highlight the expertise, energy and contribution HEIW is making to Health Care in Wales.

The CEO & Chair Conference calls with the Minister and Andrew Goodall continue on a monthly basis and are focused on the management of the response to the pandemic in preparation for upsurge, learning the lessons and resetting the NHS as we move cautiously forward. Events in recent days, with the resurgence of Covid 19 cases in some of our communities and the real potential for further measures by Welsh Government, serves to underline the challenges and the importance of good planning to ensure the NHS and its partners can respond appropriately.

Following the organisation submitting Quarter one and Quarter two operational plans, Welsh Government has published a Winter Protection Plan and work is now underway to consolidate our response as an organisation.

The organisation has responded in support of the NHS and importantly with our partners in Wales – NHS Trusts and Health Boards, Universities, Further Education Bodies and Social Care Wales. On a UK wide basis, the organisation continues to work well with the regulators and Royal Colleges and other Health Educational Bodies to ensure recruitment and training progresses. Following the A level results the Minister has supported a small increase in Medical students at Cardiff Medical school. HEIW has been pleased to be part of the discussion.

The well-being of our staff continues to be a focus for the Board. The recent announcements regarding lockdown in now 6 Local Authority areas has already impacted on closing our offices in Ty Dysgu. I have joined several staff events during the last 8 weeks. It will be important to continue to work hard at communication and support going forward. During remote working it will be even more important to work as a team and ensure we take the opportunities for joined up working. It is really important to ensure continuity of training and education across any Covid 19 challenges as well as additional work to help support services in meeting the needs of patient care. The commissioning of Health Education with our Higher education and Further Education bodies is a major contributor to the local economies across Wales during this time of economic challenge.

I continue to have twice weekly video meetings with Alex. I meet with Julie weekly and the Executive Directors on a fortnightly basis. I have monthly discussions with the Postgraduate Deans. I meet John Hill-Tout, Vice Chair, twice weekly and the Independent Members on a fortnightly basis. This has enabled good communication of ideas and I thank them all for their support and advice. I have completed the Independent Members appraisals during August.

I continue to join the NHS Chairs meetings on a fortnightly basis – key discussions on Public Health, health inequalities, resetting of services, partnership working, and leadership. HEIW presented an update on our Leadership plans to the CEO group and the Chairs meeting.

Alex and I have met with Wales Audit Office for our regular quarterly meeting.

I have joined weekly video conferences arranged through the NHS Confederation on NHS Reset. It is very clear that in Wales we have benefited from strong local relationships across public services – something we can build on and consolidate. Emerging themes around inequalities and the economic challenges impacting on future health and well-being have been highlighted

During the last couple of months, the Nurse Staffing Act Team have become part of HEIW. On Tuesday I attended the Children's Commissioners Health Seminar. It was great to hear Dawn Parry's presentation on work done in HEIW.

In conclusion, I wish to record my thanks to all our staff and in particular our communications and IT teams for continuing to keep us all well informed and connected in so many ways

## **VICE CHAIRMAN, JOHN HILL-TOUT**

The NHS Reset sessions to which both Chairs and Vice Chairs are invited have continued to provide a useful forum for discussions about the national response to the COVID Pandemic and the way in which the NHS can adapt its services to the new patterns of demand. At the most recent session we were briefed on the economic impact of the Pandemic and discussed the way in which the NHS can play its part in economic recovery.

I have continued to attend the meetings of Vice Chairs and I was pleased to accept an invitation on behalf of HEIW to present the new Leadership Portal to the August meeting. Helen Thomas attended to brief Vice Chairs who very much welcomed this new resource. Other topics considered have included the NHS Performance Framework, particularly the changes necessary to measure service delivery in the future, and the new Mental Health Services Resource Framework.

## CHAIRMAN'S ACTIVITIES

Date	Meeting Title
4 Aug	NHS Wales Chairs
5 Aug	Mid-Year Appraisals
6 Aug	Mid-Year Appraisals
10 Aug	NHS Confed NHS Reset Chairs Meeting
11 Aug	Medical Directors Senior Team Meeting
	Mid-Year Appraisals
	Discussion with Mick Gianassi Chair
20 Aug	HEIW Staff Event
	Discuss Education, Commissioning & Quality Committee
27 Aug	RATS Committee
	Board Development Session
28 Aug	111 Implementation Board
	CE & Chair Conference Call with WG
3 Sept	Review of Comms & Engagement Strategy – Angharad Price
	Staff Open Forum
8 Sept	NHS Wales Chairs
14 Sept	NHS Confed Reset Chairs and Vice Chairs Meeting
16 Sept	Inclusion & Diversity Group
21 Sept	Introductory 1:1 with Nicola Johnson, Director of Planning & Performance
	Workforce & OD Directorate Meeting
22 Sept	Annual Child Health Seminar 2020
	HEIW/Audit Office Quarterly meeting
	Welsh NHS Confed Management Board

### 3. CHAIR'S ACTION

Chair's Action was undertaken to enable the Chief Executive to approve a £2,208,168.76 invoice relating to a re-charge from NHS Wales Shared Services Partnership (NWSSP). The NWSSP re-charge related to the single lead employer arrangements for GP trainees.

Under HEIW's Delegated Financial limits as outlined within the Standing Orders the Chief Executive Officer is able to approve invoices on an unlimited basis where there is an appropriate contract approval in place. As the invoice related to a re-charge with NWSSP, it was determined that Chair's Action be utilised to enable the Chief Executive to have the necessary Delegated Financial Limit to approve the invoice. Chair's Action was taken on 3 September.

In accordance with HEIW's Standing Orders Chair's Action was taken by the Chair and the Chief Executive after first consulting with two Independent Members.

Board approval is now sought for the Chair's Action.

#### 4. RECOMMENDATION

Members are asked to:

- note the range of work highlighted by the Chair and;
- to ratify the Chair's Action outlined in para 3.

Governance and Assurance			
Link to IMTP strategic aims (please ✓)	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	✓	✓	✓
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
	✓	✓	✓
<b>Quality, Safety and Patient Experience</b>			
There are no direct quality, patient safety and experience issues relating to this report.			
<b>Financial Implications</b>			
There are no direct financial implications of this report			
<b>Legal Implications (including equality and diversity assessment)</b>			
There are no direct legal implications of this report.			
<b>Staffing Implications</b>			
There are no direct staffing implications of this report.			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
The range of activities outlined in the report will contribute to HEIW's approach to the Well Being of Future Generations Act. However, the contributions will be specific to each of the individual areas covered in overview in this report.			
<b>Report History</b>	N/A		
<b>Appendices</b>	N/A		



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<b>Meeting Date</b>	<b>24 September 2020</b>	<b>Agenda Item</b>	<b>2.2</b>
<b>Report Title</b>	<b>Chief Executive's Report – September 2020</b>		
<b>Report Author</b>	<b>Dafydd Bebb, Board Secretary</b>		
<b>Report Sponsor</b>	Alex Howells, Chief Executive		
<b>Presented by</b>	Alex Howells, Chief Executive		
<b>Freedom of Information</b>	Open		

## **Chief Executive's Report – September 2020**

### **1. INTRODUCTION**

The purpose of this report is to update the Board on key activities undertaken since the last Board meeting. During the late summer we were able to refocus on some of the key deliverables from our IMTP and reset education and training for our trainees and students whilst COVID 19 levels have been more stable. At the time of writing the situation is beginning to shift and as usual we keep our activities under close review to ensure that we respond to the pandemic environment.

### **2. KEY ACTIVITIES**

- **Coronavirus**

After a few months of a more stable position Wales is currently seeing a significant rise in Coronavirus cases in some areas. We are ready to escalate our internal emergency planning and response arrangements in line with direction from Welsh Government, and have recently reviewed our business continuity policy in light of experience to date. In any future surge we will need to focus on maintaining our core activity in relation to education and training, and minimising redeployment and disruption to trainees and students where this affects their progression. This will avoid a significant impact on the future workforce pipeline. HEIW will continue to adopt an agile approach to support the workforce needs of the NHS in response to COVID-19 and this will be reflected in our plan for the remainder of the year.

- **Ty Dysgu**

In light of the developing COVID-19 situation we have taken the decision to pause the next revision of our operating model - which was to ask all staff to return to Ty Dysgu at least one day per week. In light of the recent lockdown for Rhonda Cynon Taf we took the decision to revert to a full remote working model and close the building until the lockdown is lifted. Although this is disappointing, we have the plans in place to enable us to work in a variety of operating models now which should enable us to be flexible during the winter months.

- **Livestreaming of the Board Meeting and AGM**

We will today enable to public, partners and stakeholders to observe today's Board and Annual General Meeting through livestreaming technology. We are looking forward to trying this approach out, building on the success of the livestreaming of the Board in July.

We are also holding a showcase event following the AGM covering:

- Primary Care ;
- Routes into and out of education and training in Wales;
- Training in Wales is the best in the UK – discuss;
- Developing healthcare leaders of the future.

- **Winter protection planning**

The Winter Protection Plan 2020/21 was announced by Welsh Government on 15 September. The plan will be supported by the Quarter 3 and Quarter 4 NHS planning Framework which is to be issued in the same week as September Board. It is anticipated that HEIW's Quarter 3 and Quarter 4 plan will be submitted to Welsh Government in mid-October. Meetings are currently being held with CEOS/WODs from other NHS organisations to explore how HEIW can support the wider system through the winter period.

- **Update on Strategic Review of Health Professional Education**

We are pleased to note that we have finalised the Contract Specifications for Health Professional Education and the Invitation to Tender documents to be issued to Education Providers, which represents the culmination of Phase 1 of our Strategic Review of Health Professional Education. These documents have been considered by our Education Quality and Commissioning Committee and at our In Committee meeting today. Subject to approval the next step is to submit these to the Welsh Government for Ministerial approval.

The Contract Specifications is the largest commissioning process undertaken by HEIW and seeks to shape and secure pre-registration health professional education for Wales for the next seven to ten years. The new education programmes will commence in September 2022.

- **Strategic Equality Plan**

The Board is today being asked to consider and approve HEIW's first Strategic Equality Plan and Objectives 2020-2024. The Plan was considered at August's Board Development Session. The Plan sets out how HEIW will, over the next four years, strengthen our approach in advancing equality, eliminating discrimination and fostering good relations.

While the Plan has a strong emphasis on what we will do internally, we are also committed to ensuring that it is reflected in our external approach with stakeholders.

Responsibility for implementing the plan and objectives falls to all our HEIW family, we expect conscious engagement from us all.

- **Q2 Performance Report**

This report covers the periods of July and August and has some key updates on our fill rates for education and training. The report reflects the overall good progress made in reinstating and progressing the IMTP objectives which is reflected in the performance dashboard. We continue to focus on developing the dashboard and the integrated performance framework and extending the scope of our performance management to include new issues such as bursary appeals.

We have recently concluded the end of year service reviews which we have held with several delivery teams in the organisation. We will be making the slide sets

and notes available to Independent Members as they include some interesting and useful information about our functions.

- **Finance Report**

A paper outlining the month five position is on the agenda and continues to reflect the uncertainty that has been created by the pandemic. Close links with the teams commissioning education and training, and with Welsh Government are ensuring that we monitor and manage this situation effectively

- **Risk**

There are 11 risks on the agenda of which one is red:

- Cyber security.

### 3. RECOMMENDATION

The Board is asked to note this report.

<b>Governance and Assurance</b>			
<b>Link to IMTP strategic aims</b> (please ✓)	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	✓	✓	✓
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
	✓	✓	✓
<b>Quality, Safety and Patient Experience</b>			
There are no direct quality, patient safety and experience issues relating to this report.			
<b>Financial Implications</b>			
There are no direct financial implications of this report.			
<b>Legal Implications (including equality and diversity assessment)</b>			
There are no direct legal implications of this report.			
<b>Staffing Implications</b>			
There are no direct staffing implications of this report			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
The range of activities outlined in the report will contribute to HEIW's approach to the Well Being of Future Generations Act. However, the contributions will be specific to each of the individual areas covered in overview in this report.			
<b>Report History</b>	The CEO report is presented at each open Board session which is held once every two months.		
<b>Appendices</b>	N/A.		



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<b>Meeting Date</b>	24 September 2020	<b>Agenda Item</b>	<b>3.1a</b>
<b>Report Title</b>	<b>Health Professional Strategic Review – Governance Approval Process</b>		
<b>Report Author</b>	Martin Riley. Deputy Director, Education, Commissioning and Quality		
<b>Report Sponsor</b>	Eifion Williams. Director of Finance		
<b>Presented by</b>	Eifion Williams. Director of Finance		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of the report is to provide the Board with assurances of the governance surrounding the approval process for the final Strategic Review documentation.		
<b>Key Issues</b>	To provide the Board with assurance in respect of the governance surrounding the approval process final Strategic Review documentation.		
<b>Specific Action Required (please ✓ one only)</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			✓
<b>Recommendations</b>	<p>The Board is asked to,</p> <ul style="list-style-type: none"> <li>Note for <b>assurance</b> the process of review and approval of ensuring that the papers presented have received scrutiny of both the HEIW Executive Team and the ECQ Committee and have been amended accordingly.</li> <li></li> </ul>		

# **STRATEGIC REVIEW OF HEALTH PROFESSIONAL EDUCATION GOVERNANCE APPROVAL PROCESS**

## **1. INTRODUCTION**

The purpose of the report is to provide the Board with assurances of the governance surrounding the approval process for the final Strategic Review documentation.

## **2. BACKGROUND**

Board members will remember previous briefings on the work undertaken by the Strategic Review of Health Professional Education Programme Board. The HEIW Board is now presented with the outcome of the work of the Programme Board. While the covering paper will be considered in Open session the appendices will be considered in closed session as they are deemed commercially sensitive:

- A Cover report for the work undertaken and outcome of the Strategic Review of Health Professional Education – Phase 1 (Open session)
- Appendix 1: The presentation for the final stakeholder event held on 11<sup>th</sup> September 2020. (Closed session)
- Appendix 2: The Invitation To Tender (ITT) and the Service Specification documents. (Closed session)
- Appendix 3: The questions to be addressed within the evaluation process.(Closed session)
- Appendix 4: The Procurement Contract Briefing paper.(Closed session)

These papers are presented to the HEIW Board in order that it may:

- Note the plan and the procurement strategy
- Approve the ITT and Contract Specification
- Approve the Procurement Report for submission to the Director of Procurement Services in NWSSP and the Welsh Government

## **3. GOVERNANCE AND RISK ISSUES**

The assurance process for the Strategic review documentation is outlined below.

The Strategic Review has been overseen by a Project Board, chaired initially by the former Director of Nursing and latterly by the Director of Finance. The Project Board comprises HEIW staff and senior members of NWSSP's Procurement and Legal & Risk Services Directorates.

Two sub-groups were established, the Documentation Group and the Communications Group, both chaired by the Deputy Director for Education, Commissioning and Quality. The Project Board and two sub-groups have defined terms of reference and membership. On the advice from Legal Colleagues documents have been marked as "Commercially Sensitive". The Project Board and two sub-groups utilised project management tools to manage the activities required to be undertaken, including Gantt charts and risk registers.

The suite of papers produced by the Project Board were presented to the HEIW Formal Executive Team meeting by the Deputy Director, Education, Commissioning and Quality on 10<sup>th</sup> September 2020.

Following discussion, the comments were addressed, and the papers were subsequently amended before their presentation to the Education, Commissioning and Quality Committee on the 16<sup>th</sup> September 2020 by the Director of Finance and the Deputy Director, Education, Commissioning and Quality.

Following further scrutiny at the Education Commissioning & Quality Committee and the range of questions raised by the Chair of the Committee the suite of papers was further updated before submission to the Board for consideration and approval. Therefore, the documents presented to Board incorporate the amendments required from the scrutiny at the Formal Executive Team, the ECQ Committee and also the written questions received from the EC&QC Committee Chair.

The Board is asked to note the governance around the approval process and the iterative process of ensuring the papers presented have received scrutiny of both the HEIW Executive Team and the ECQ Committee.

#### **4. FINANCIAL IMPLICATIONS**

These are set out in the cover paper for the Strategic Review of Health Professional Education.

#### **5. RECOMMENDATION**

The Board is asked to:

Note for **assurance** the process of review and approval of ensuring that the papers presented have received scrutiny of both the HEIW Executive Team and the ECQ Committee and have been amended accordingly.

<b>Governance and Assurance</b>			
<b>Link to IMTP strategic aims</b> (please ✓)	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	✓	✓	✓
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
	✓	✓	✓
<b>Quality, Safety and Patient Experience</b>			
Underpins all aspects of the contract.			
<b>Financial Implications</b>			
Set out in the cover paper for the Strategic Review of Health Professional Education.			
<b>Legal Implications (including equality and diversity assessment)</b>			
A Senior Solicitor from within Legal and Risk Services, NWSSP with a contract and commercial law background has been funded to support this work and has been part of developing the ITT and Contract Specification. In addition, the Workforce, Equality and Diversity Officer within HEIW has been part of the project team from the inception of the project structure (May 2019).			
<b>Staffing Implications</b>			
A project team has been established and funded to deliver this piece of work. This includes admin support for the ECQ Team within the Nursing Directorate and dedicated procurement and legal support from NWSSP.			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
Set out in the paper and themes incorporated into the new contract			
<b>Report History</b>	NA		
<b>Appendices</b>			



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<b>Meeting Date</b>	24 September 2020	<b>Agenda Item</b>	<b>3.1b</b>
<b>Report Title</b>	<b>Health Professional Strategic Review – Final Position</b>		
<b>Report Author</b>	Martin Riley. Deputy Director, Education, Commissioning and Quality		
<b>Report Sponsor</b>	Eifion Williams. Director of Finance		
<b>Presented by</b>	Martin Riley. Deputy Director, Education, Commissioning and Quality & Eifion Williams. Director of Finance		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of the report is to provide the Board with the final procurement proposals for the strategic review of health professional pre-registration education.		
<b>Key Issues</b>	<ul style="list-style-type: none"> <li>• Lotting Strategy</li> <li>• Key Themes</li> <li>• Procurement Timelines</li> <li>• ITT and Contract Specification</li> <li>• Finance Implications</li> <li>• Governance Arrangements</li> <li>• Approval</li> </ul>		
<b>Specific Action Required (please ✓ one only)</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			<b>Approval</b> ✓
<b>Recommendations</b>	The Board is asked to, <ul style="list-style-type: none"> <li>• Note the plan and procurement strategy</li> <li>• Approve the ITT and Contract Specification</li> <li>• Approve the Procurement Report for submission to the Director of Procurement Services in NWSSP and the Welsh Government</li> </ul>		

# STRATEGIC REVIEW OF HEALTH PROFESSIONAL EDUCATION

## 1. INTRODUCTION

HEIW commission health professional education and training in order to support Health Boards and NHS Trusts to implement their Integrated Medium Term Plans and provide them with the workforce they need to meet the needs of their local population and Service Users.

Contracts were due to expire in July 2021 and a modification notice was placed on “Sell2Wales” to extend these by a further year until July 2022. Since no challenges to this notice were received within the stipulated 30 days HEIW can now extend all contracts until July 2022. All Universities have been formally notified of the extension to the contract period.

The Strategic Review of Health Professional Education Phase 1 is a programme that seeks to secure pre-registration health professional education for Wales for the next 10 years. This programme presents an opportunity to review the current shape and focus of the current provision and consider the education specifications and programmes required to support the NHS in Wales going forward.

A review conducted by KPMG, extensive stakeholder engagement and research of international best practice by the ECQ Team were undertaken as part of the programme. The following emerged as the key principles, which are in line with A Healthier Wales, and the new Workforce Strategy and HEIW’s Strategic Aims and Objectives were also incorporated into the new contracts:

- HEIW developing its role in **supporting newly qualified staff**
- Further development of a strategic role in **placement provision**
- **Local / regional approach** to commissioning where appropriate
- Building **resilience** in the system
- Using **technologies** to enhance teaching, student support and placement preparation
- Integrate the **digital environment** into learning
- Develop education and training across the **whole career pathway**
- Establish an enhanced approach to **inter-professional education**
- Developing **flexible routes**
- Closer **tripartite working arrangements**
- **Improve responsiveness** to Service Need/ WG Policy
- **Supporting students** from disadvantaged backgrounds
- **Distance and Dispersed Learning**
- **Compassionate Leadership**

This is the first time a whole system review of Health Professional Education has been undertaken in Wales. The result of the research, extensive engagement and the alignment with strategic policy documents has resulted in an innovative, new contract which will ensure high quality, appropriate Education Providers who can demonstrate delivery of high quality services, partnership working with health and social care

thereby enabling Wales to meet the needs of the NHS in Wales and service users - both now and in the future.

The “shape” of education, as highlighted in the lotting strategy contained within this report will ensure access to Health Professional education is enhanced, providing potential students from all parts of Wales better opportunities and more flexible ways to study. The widening access agenda, which underpins the recruitment, selection and student experience elements of the new contract again provides more opportunities for students to train. The student support mechanisms embedded in the new contract are designed to ensure that all students receive the bespoke support they need to progress.

Recruitment of students from rural areas through the lotting strategy should offer equitable access to people living in rural communities from the start. Additional measures have been implemented to ensure students from rural areas have priority access to blended learning nursing programmes across Hywel Dda and Powys (Lots 3 and 4).

To ensure recruitment activities are evenly undertaken across all areas of Wales, HEI's will annually report on recruitment trends and activities; this combined with new data analytics methods will enable mapping of students' areas of residency to highlight any lack of representation. Should an Education Provider fail to recruit evenly, the commissioner will set an action for the provider to undertake corrective action. Outcomes of the benefits of the deprivation fund will be closely monitored. The new data analytics methodology assists in mapping the student journeys to ensure that rates of progression and degree classification is equitable. Successful bidders will be expected to provide transparent annual reports of any potential Differential Attainment. This includes any variation in experience, perceptions or attainment for different groups with protected characteristics, including from differing socio-economic backgrounds. As part of the quality metrics contained within the new contract the Education, Commissioning and Quality Team (ECQT) within HEIW will continue to meet annually with large groups of students to discuss their experiences in their respective universities. Students that have received additional support through the deprivation fund will be invited to feedback their experiences and the effects of the additional fund on their education.

The specification facilitates care closer to home and a whole system approach to health and social care by further enhancing the general, multi-disciplinary skills and experiences provided to students. This better enables students to become effective practitioners across primary, secondary, community, independent and social care sectors.

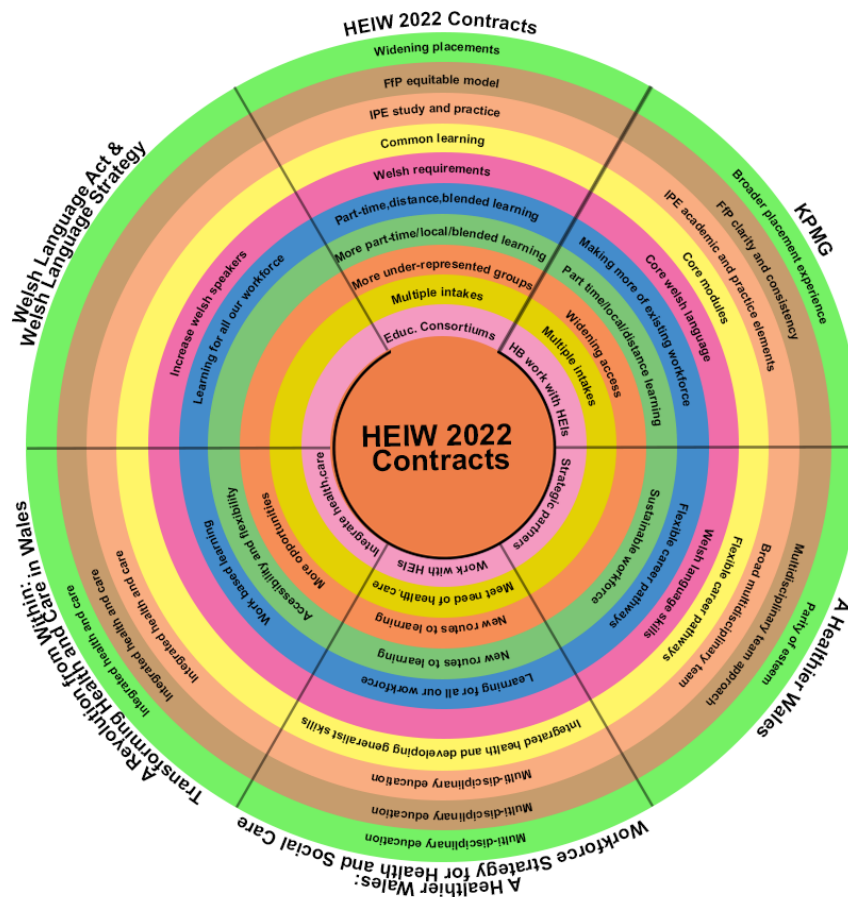
All practice placements will offer a broad range of learning experiences and environments alongside robust academic learning opportunities that are critical to student development. Practice placements must include opportunities in Primary, Community, Social Care Sector, Independent sectors and the Third Sector, with providers specifically evaluated on their ability to form effective partnerships with each of the areas or sectors, including primary care. The appointment of a Head of Placements Experience, as detailed in the tender documents will further aid the monitoring, continuation and expansion of placements into primary care and other

settings to facilitate a joined-up approach across all elements of health and care. The requirements around inter-professional education and multi-disciplinary placements replicate best practice in other parts of the world and expanding placements further into Primary, Community and Social Care ensures that we are producing Health Professionals with the broadest experience during their training to equip them to work across the Health and Social Care sectors.

The Inter professional Education (IPE) standards in the contract have deliberately been developed to be as flexible as possible. The universities are required to scope the professions that the students are most likely to work with on graduation. The medical profession will undoubtedly be the profession that all of our healthcare professionals will work with in practice. It is recognised that this will happen organically to certain extent however we plan to work with the universities to facilitate cross institution and cross school working. The Education, Commissioning and Quality Team will ensure links are generated by collaborative working with colleagues in HEIW in medicine, dental, primary care and pharmacy. This is key to taking this forward once the contracts have been awarded. To ensure that IPE is implemented effectively within the contracts across relevant disciplines (including medical), performance and quality metric have been built into the Contract Specification and this will be assessed and monitored by HEIW on an annual basis.

A mapping exercise was undertaken against the key themes within the new contracts and the main policy drivers:

#### HEIW - Building health education for the future



The key themes combined add a dimension to health professional contracts in Wales that are not prevalent – in their entirety - across other parts of the UK. This new contract therefore is not just fit for the future but will provide Wales with a world class health profession education system.

The KPMG Report and much of the engagement processes pre-dated the covid-19 pandemic. However, on reviewing the key themes in light of covid-19 they are still all relevant and valid.

During the pandemic Universities have fully engaged with delivery of education through digital and virtual means and have been able to deliver both synchronous and asynchronous education through digital and virtual learning.

The feedback is that the students have adjusted to the change well. This has confirmed our belief that delivering education and training through digital means could enhance the student experience if undertaken well and provide long arm support to students at a distance.

In addition the Contract Specification has incorporated a requirement to prepare practitioners for digital online delivery of services. Most disciplines have now adopted this approach in practice and the students will from here on be engaging in this service model on placement. The contract promotes and benchmarks digital capability as part of the performance and quality metrics. It is vital that this agenda is continuously developing, with or without Covid. However, equipping students with digital skills and learning and delivering education through digital means is a high priority within the contract and helps equip new3 health professional graduates with the skills they require to deliver safe and quality care in an ever evolving Service.

## 2. ENGAGEMENT

Following the KPMG Review and to ensure the new contract derives the maximum benefit and meets the needs of the Service and Universities the following engagement plan was developed to explore the identified key themes further,

Date	Engagement
<b>11 October 2019</b>	Event in Cardiff for all interested bidders. The morning consisted of a series of presentations delivered by HEIW on the emerging themes, draft lotting strategy and key procurement information. The afternoon was available for interested parties to book 25 minute individual sessions with key HEIW staff.
<b>November 2019 – January 2020</b>	HEIW visited each Health Board and Trust Executive Team to share emerging themes, draft lotting strategy and key procurement information. The focus of these visits was to ensure that, as far as possible, the new contract addresses the needs of individual regions to act as an enabler in providing the right workforce at the right time with the necessary skills to support quality and safe patient care.
<b>November/</b>	HEIW, visited all Universities:

<b>December 2019</b>	<p>a) For currently contracted Universities a “Part B” was added to the scheduled Contract Quality visit</p> <p>b) For other interested parties a separate visit was arranged</p> <p>This provided the Universities the opportunity to seek further clarification and provide more feedback on the draft contract and strategy.</p>
<b>January 2020</b>	<p>Student Engagement events to be held across Wales</p> <p>Key themes were tested with students and this assisted HEIW in ensuring that the new contracts are fit for purpose and reflect student needs.</p>
<b>February 2020</b>	<p>Engagement with service users and patient groups across Wales</p> <p>Key themes were tested with patients and service users and assisted the Commissioner in ensuring that the new contracts are fit for purpose and reflect patient needs.</p>
<b>July 2020</b>	<p>Virtual Pricing &amp; Strategy Event held for all interested bidders. This tested further HEIW’s proposed pricing strategy. This is highlighted in more detail in the Finance section of this report.</p>
<b>7 September 2020</b>	<p>A Virtual Evaluation Training day was held for evaluators. The purpose was to inform evaluators of their duties and responsibilities as evaluators, inform them of the procurement exercise and provide evaluators with the opportunity to work with HEIW to ensure that the evaluation questions are fit for purpose and will facilitate the award of contracts to the best and most appropriate bidders. Diverse Evaluation teams results in enhanced decision making which:</p> <ol style="list-style-type: none"> <li>1. Ensures robust processes and scrutiny to assist in securing the most appropriate providers</li> <li>2. Reduces the risk of challenge / successful challenges to decisions</li> <li>3. “Buy-in” / Ownership from the Service</li> </ol>
<b>11 September 2020</b>	<p>Final stakeholder event (Virtual) where final contract and strategy will be presented to all interested parties.</p>

**This has been an iterative process where the contract specification has been routinely refined based on stakeholder engagement. The stakeholder events for potential bidders have tested our key themes, including the lotting and pricing strategies and, where appropriate, adjustments have been made to the requirements set out in the Contract Specification. For example, the initial IPE**

**proposals have been modified and some of the lots have been refined. Therefore, the final contract is a balanced contract, meeting the requirements of stakeholders but cognisant of Universities ability and appetite to deliver.**

The high level timescales for the tendering exercise and awards process are shown below.

Key Milestone	Date
HEIW Board Approval	September '20
Ministerial Approval	October '20
Place OJEU Notice to trigger procurement	October '20
Bid submission	End of December '20
Evaluation of bids	January - February '21
Award procedures / sign-off	March – mid April '21
Award of Contracts	Mid-April '21
Contract commencement	August '21
New education programmes commence	September '22

The responsibilities of bidders include:

- Provision of a mobilisation plan within their tender response setting out the planned activities required to achieve and demonstrate readiness to deliver the Services including
- Timelines for achievement and completion of key activity in the form of a Gantt chart or equivalent project planning diagram
- Identification of staff members who will be allocated to lead on each of the key activities
- Identification of any potential risks and the actions that will need to be put in place to mitigate against such risks.

Most of the HEIs in Wales are already delivering health care professional education and, if they are successful in maintaining contracts, they will need to continue to provide this education whilst setting up the new provision or modifying existing provision to meet the contract standards from 2022. The Education and Commissioning and Quality Team will meet with the universities on a regular basis to ensure that their implementation plan is on track. The universities will be required to undertake the following to ensure that they can deliver the education on time for September 2022:

- Recruit registered health care professional academic staff to satisfy the professional regulatory and professional body (PSRB) standards
- Develop business plans to meet internal scrutiny of the HEI quality and standards board
- Develop the full teaching programmes including programme specifications, module descriptors and placement documentation to meet the PSRB standards and the internal HEI quality and standards board
- Develop learning and teaching and assessment strategies to meet the PSRB standards and the internal HEI quality and standards board.
- Establish working links with placement providers and develop all required paperwork

- Establish working links with other healthcare programmes in order to meet the IPE standards
- Establish occupational health student services if not currently delivering healthcare professional education
- Complete internal validation documentation and submit the required PSRB documentation in order to set up validation events
- Host the validation event or events
- Meet the requirements and adjustments set following the validation events
- Set up timetabling
- Link in with university central services for academic registry, student wellbeing support, careers, marketing and student recruitment
- Develop all level 4 (year 1) teaching materials and online teaching resources.
- Employ values based recruitment process to recruit the student to the programme

Attached at **Appendix 1** is the presentation for the final stakeholder event held on 11<sup>th</sup> September 2020.

### **3. INVITATION TO TENDER (ITT) AND SERVICE SPECIFICATION**

Attached at **Appendix 2** is the ITT and the Service Specification. It is intended to be read by prospective Bidders who could provide and manage the Services required under the Requirement. All Bidders will be expected to meet the Requirements set out within this ITT and Specification and confirm this within the technical envelope of the tendering portal.

The Specification anticipates that successful Bidders will be Education Providers (EP) who are able to:

- deliver the education to participants regionally or nationally in Wales, where applicable, as set out in the lotting strategy
- ensure that the education is provided in the context of A Healthier Wales – Our Workforce Strategy for Health and Social Care deliver all Placements within Wales

HEIW (the Commissioner) welcomes Bids from all types of bidding organisations, whether they be sole bidders or a number of bidders seeking to put in a collaborative/consortia bid. It is a matter for bidding organisations to choose how they structure their Bids. Bidders may be a single organisation or a group or combination of organisations acting together in a single strategic collaboration (through a consortium, joint venture, partnership arrangement or otherwise). Where collaborative approaches are developed the commissioner will contract with one of the legal entities involved.

Bidders are invited to submit Bids to provide the Requirement for the Commissioner. The successful Bidder will, in delivery of the Requirement, be required to engage with the Commissioner's staff and management responsible for the Services to which this procurement relates. This will ensure successful delivery of the Requirement, whilst achieving and consistently maintaining the highest service and standards throughout the term of Contract in line with the specified contract management and attainment of the contractual KPIs and quality measures.

The ITT sets out:

- Definitions
- Overview
- Lotting Strategy
- Transitional Arrangements
- Tender Process and Timelines
- Procurement Information & Guidance for Bidders
- Evaluation Methodology including the Scoring matrix

The Contract Specification details:

- Partnership responsibilities
- Recruitment & Selection
- Widening Access
- Inter-Professional Education (IPE)
- Practice Placements and Placement Management and Principles
- Digitalisation and Technology
- Occupational Health
- Student Wellbeing
- Welsh Language
- Equality, Diversity and Inclusion
- Distance and Dispersed Learning
- Community Benefits
- Compassionate Leadership and Improvement
- Performance Management
- The Quality Framework
- Data Reporting Requirements
- Partnership Working Arrangements Information Governance
- Disputes Resolution

#### **4. THE LOTTING STRATEGY**

The lotting strategy has been developed and tested in collaboration with stakeholders and partners. It has been designed to build resilience to the Health professional education commissioning across Wales, to best meet the needs of Health Boards and Trusts in Wales and to afford the opportunity for more Welsh residents to access education.

The Lots shown below provide indicative numbers in the format for a range of commissions for 2022/23. These numbers can change on an annual basis taking into account:

- Information from NHS organisations IMTP's
- Workforce modelling/wider available workforce intelligence
- WG strategic direction (AHW) & wider policy requirements
- Capacity within the system to support training
- Opportunities to transform the workforce – innovation / new roles

- Numbers can be altered year on year, at the Commissioners discretion, by + or – 20%.
- Numbers can be commissioned outside this range with the agreement of both the Commissioner and EP

Where there are particular issues relating to specific lots, these have been identified as guidance to potential bidders to enable them to target these areas and provide assurances in their bids that any pertinent issues are addressed.

**Lot 1 – Nursing (Adult, Child & Mental Health) Lot 1 is divided into 11 Sub-lots as set out below:-**

Sub-lot Number	Location of Education Delivery	Required Model of Education Delivery*	Range of Commissioning Numbers per year			
			Adult	Child	Mental Health	Total
<b>1a</b>	Cardiff & Vale incl. Velindre	Full Time BSc /MSc	155-175	17-22	38-47	<b>210-244</b>
<b>1b</b>	Cardiff & Vale	Full Time BSc Part Time BSc PG Dip/MSc	65-75	8-12	17-25	<b>90-112</b>
<b>1c</b>	Aneurin Bevan	Full Time BSc / MSc	160-175	14-20	38-46	<b>212-241</b>
<b>1d</b>	Aneurin Bevan & Powys	Full Time BSc Part Time BSc PG Dip/MSc	100-115	14-20	28-36	<b>142-171</b>
<b>1e</b>	Cwm Taf Morgannwg	Full Time BSc Part Time BSc PG Dip/MSc	250-265	25-35	58-70	<b>333-370</b>
<b>1f</b>	Swansea Bay	Full Time BSc Part Time BSc PG Dip/MSc	205-220	22-30	52-65	<b>279-315</b>
<b>1g</b>	Hywel Dda - North	Full Time BSc Part Time BSc	28-35	0	12-15	<b>40-50</b>
<b>1h</b>	Hywel Dda – East, South and West	Full Time BSc Part Time BSc	130-150	17-24	30-39	<b>177-213</b>
<b>1i</b>	BCU West	Full Time BSc Part Time BSc	90-100	11-14	22-30	<b>123-144</b>
<b>1j</b>	BCU Central / East	Full Time BSc Part Time BSc PG Dip/MSc	120-130	14-18	30-39	<b>164-187</b>
<b>1k</b>	BCU Central / East -teaching across 2 sites in Wrexham and C&D	Full Time BSc Part Time BSc	90-100	11-14	22-30	<b>123-144</b>

- EPs must be able to recruit the minimum commissioned numbers detailed in the table above.
- EPs for Sub-lots 1a, 1b, 1c, 1d, 1e, 1f, 1h, 1i, 1j and 1k must provide two Student cohorts for both adult nursing and mental health nursing per annum. One adult

nursing cohort and one mental health nursing cohort must start in September and the second cohort of adult nurses and mental health nurses must start between January to April.

- All Sub-lots for child nursing can comprise of one of two cohorts per annum.
- PG Dip/MSc must be offered but is restricted to a maximum of 10% of all commissioners.
- For all Sub-lots incorporating part time provision, the part time provision must comprise a minimum of 10% of total commissions.

A maximum of 3 Sub-lots will be awarded to an individual EP and therefore Bidders will be asked to select their preference within their Bid as set out within the technical envelope in Bravo eTender Wales.

EPs are required to work collaboratively with local education providers of level 4 Health Care Support Worker education to ensure Programmes map directly into year two (level 5) Adult Nursing Programmes.

All Sub-lots must include Students progressing with a Cert HE (support worker route) and will gain direct entry to year 2 of a field of nursing. These numbers are contained within the totals detailed above and will commence year 2 in 2023/24.

Sub-lot	Full provision	time	Part provision	time	Totals
1a	15		0		15
1b	0		5		5
1c	10		0		10
1d	0		15		15
1e	10		15		25
1f	10		15		25
1g	0		5		5
1h	10		15		25
1i	10		15		25
1j	10		15		25
1k	10		15		25
Total	85		115		200

- All nursing Sub-lots will have a target of an additional number of **return to practice** commissions each year.
- The return to practice target is 5% of annual commissions.
- The return to practice numbers are in addition to the annual commissions set out in Sub-lots 1a-1k.
- The return to practice fee will be £1400 per Student for the first 3 years and then subject to the price review mechanism as set out in section 28 of this ITT.

## Lot 2 – Nursing Learning Disability

Sub-lot Number	Location of Education Delivery	Health Boards covered	Required Model of Education Delivery	Range of Commissioning Numbers per year
<b>2a</b>	North Wales	BCU	Full Time BSc	<b>13-18</b>
<b>2b</b>	South East Wales and Powys	C&V, AB, CTM, POW	Full Time BSc	<b>35-42</b>
<b>2c</b>	South West and West Wales	SB, HD	Full Time BSc	<b>22-27</b>

- Recruitment to Nursing Learning Disability provision is a challenge. EPs may need to be creative with marketing strategies to ensure there are sufficient quality applicants to fill commissioned places

## Lot 3 – Dispersed Learning: Nursing (Adult & Mental Health)

Sub-lot Number	Location of Education Delivery	Required Model of Education Delivery	Range of Commissioning Numbers per year		
			Adult	MH	Total
<b>3a</b>	Powys	Full Time BSc	18-23	9-12	<b>27-35</b>
<b>3b</b>	Hywel Dda	Full Time BSc	18-23	9-12	<b>27-35</b>

- Local recruitment is fundamental for delivery of dispersed learning.
- Within Sub-lot 3a, Students must reside within the Powys area as per the Commissioner's indicated map in section 7.2 of this ITT.
- Within Sub-lot 3b, Students must reside within the Hywel Dda area as per the Commissioner's indicated map in section 7.2 of this ITT.

## Lot 4 – Distance Learning: Nursing (Adult, Child & Mental Health)

Lot Number	Location of Education Delivery	Required Model of Education Delivery	Range of Commissioning Numbers per year			
			Adult	Child	MH	Total
<b>4</b>	Distance Learning	Full Time BSc	55-65	12-18	18-23	<b>85-106</b>

- A minimum of 33% of Student places must be awarded to Students residing in the Powys and Hywel Dda geographical areas.

## Lot 5 – Midwifery

Sub-lot Number	Location of Education Delivery	Health Boards covered	Required Model of Education Delivery*	Range of Commissioning Numbers per year
<b>5a</b>	South East Wales (One intake in September)	C&V / AB	Full Time BSc Part Time BSc	<b>45-52</b>
<b>5b</b>	South East Wales and Powys – (Two intakes – September plus January-April)	AB, C&V, CTM, POW	Full Time BSc Part Time BSc	<b>45-52</b>
<b>5c</b>	West Wales (Two intakes – September plus January-April)	SB, HD	Full Time BSc Part Time BSc	<b>45-52</b>
<b>5d</b>	North Wales – (Two intakes – September plus January-April)	BCU	Full Time BSc Part Time BSc	<b>45-52</b>

- Lots 5b, 5c and 5d must have two cohorts – one starting in September of the relevant academic year and the second must start between January to April of that academic year.

## Lot 6 – Occupational Therapy

Sub-lot Number	Location of Education Delivery	Health Boards Covered	Required Model of Education Delivery* and Range of Commissioned Numbers per year			
			Full Time BSc	Part Time BSc	Post Graduate Diploma/MSc	Total
<b>6a</b>	South East Wales	C&V, AB, CTM	55-62	0	18-23	<b>73-85</b>
<b>6b</b>	South East Wales	C&V, AB, CTM	0	13-17	0	<b>15-20</b>
<b>6c</b>	South West and West Wales	SB, HD	25-30	10-13	0	<b>35-43</b>
<b>6d</b>	North Wales and Powys	BCU, Powys	27-32	13-17	0	<b>40-49</b>

- Education Providers who are successful in winning Sub-lot 6a, 6b, 6c or 6d must ensure Students experience Placements within Health and Social Care environments

## Lot 7 – Physiotherapy

Sub-lot Number	Location	Health Boards Covered	Required Model of Education Delivery and Range of Commissioning Numbers per year			
			Full Time BSc provision	Part Time BSc Provision	Post Graduate Diploma/ MSc	Total
<b>7a</b>	South Wales	C&V, AB, CTM, POW	69-73	0	19-22	<b>88-95</b>
<b>7b</b>	South Wales	C&V, AB, CTM	0	14-18	0	<b>14-18</b>
<b>7c</b>	South West & West Wales	SB, HD	25-33	0	10-12	<b>35-45</b>
<b>7d</b>	North Wales	BCU East, POW	16-22	0	0	<b>16-22</b>
<b>7e</b>	North Wales	BCU West	0	0	15-20	<b>15-20</b>

- EPs must develop Placements that ensure Students have experience of first contact physiotherapy services.

## Lot 8 – Diagnostic Radiography

Sub-lot Number	Location	Health Boards covered	Required Model of Education Delivery and Range of Commissioning Numbers per year		
			Diagnostic Radiography Full Time Provision BSc	Assistant Radiographer Practitioners HE Cert	Total
<b>8a</b>	South East Wales	C&V, AB, CTM	70-80	12-15	<b>82-95</b>
<b>8b</b>	South West and West Wales	SB, South, East and West HD	26-33	0	<b>26-33</b>
<b>8c</b>	North Wales incl. Powys & North HD	BCU, Powys & North HD	31-39	0	<b>31-39</b>

- Placement capacity is a challenge within NHS Wales Health Boards and EPs will need to be creative in how they ensure Students have access to safe, quality

Placement experiences that will allow them to meet their required learning outcomes.

- EPs must work with NHS Wales Health Boards to recruit Salaried Students to the assistant radiography practitioners commissions in Sub-lot 8a.

## Lot 9 –Radiography and Oncology

Lot Number	Location	Health Boards Covered	Required Model of Education Delivery and Range of Commissioning Numbers per year
			Full Time BSc Provision
<b>9</b>	All Wales	AB, BCU, CTM, C&V, SB, VEL, HD, POW	<b>23-30</b>

The EP must secure Placements across all of Wales based on need, as guided by the Placement Plan (redacted example included in Appendix C)

## Lot 10 – Podiatry

Lot Number	Location	Health Boards Covered	Required Model of Education Delivery and Range of Commissioning Numbers per year
			Full Time BSc Provision
<b>10</b>	All Wales	AB, BCU, CTM, C&V, SB, VEL, HD, POW	<b>26-31</b>

## Lot 11 – Speech & Language Therapy

Sub-lot Number	Location	Health Boards Covered	Required Model of Education Delivery and Range of Commissioning Numbers per year		
			Full Time BSc Provision in the medium of English Language	Full Time BSc Provision in the medium of Welsh Language	Total
<b>11a</b>	South, West and Mid-Wales	AB, CTM, C&V, SB, HD, POW	30-34	8-10	<b>38-44</b>
<b>11b</b>	North Wales	BCU	5-7	5-6	<b>10-13</b>

- A set number of Students recruited to Sub-lot 11a are required to be Welsh Speakers and the EP will be required to support Students throughout the Programme to ensure that they will be enabled to deliver their Services in Welsh.

- Students recruited to Sub-lot 11b are required to be Welsh Speakers and the EP will be required to support Students throughout the Programme to ensure that they will be enabled to deliver their Services in Welsh.

## Lot 12 – Dietetics

Sub-lot Number	Location	Health Boards Covered	Required Model of Education Delivery and Range of Commissioning Numbers per year		
			Full Time BSc Provision	Full Time Post Graduate Diploma/MSc	Total
<b>12a</b>	South, West and Mid-Wales	AB, CTM, C&V, SB, HD, POW	35-40	17-20	<b>52-60</b>
<b>12b</b>	North Wales	BCU	12-15	0	<b>12-15</b>

- EPs bidding for Sub-lot 12a will be required to deliver both undergraduate pre-registration and postgraduate pre-registration education.

## Lot 13 – Paramedic Science

Sub-lot Number	Location	Health Boards Covered	Required Model of Education Delivery and Range of Commissioning Numbers per year
			Full Time BSc Provision
<b>13a</b>	South, West and Mid-Wales	AB, CTM, C&V, SB, HD, POW	<b>50-65</b>
<b>13b</b>	North Wales	BCU	<b>12-15</b>

- EPs must secure Placements across all areas of the Health and Care sector, including primary care.

## Lot 14 – Biomedical Sciences

Lot Number	Location	Health Boards Covered	Required Model of Education Delivery and Range of Commissioning Numbers per year
			Full Time BSc Provision
<b>14</b>	All Wales	AB, CTM, C&V, SB, HD, POW, BCU	<b>28-35</b>

- EP must secure Placements across all of Wales based on need, as guided by the Placement Plan in Appendix C.

- A combination of disciplines will be required:
  - Blood
  - Genetics
  - Infection
  - Cellular

### Lot 15 – Operating Department Practitioners (ODP)

Sub-lot Number	Location	Health Boards Covered	Required Model of Education Delivery and Range of Commissioning Numbers per year
			Full Time BSc Provision
<b>15a</b>	South East Wales and Powys	C&V, AB, CTM, POW	<b>27-32</b>
<b>15b</b>	South West and West Wales	SB, HD	<b>12-15</b>
<b>15c</b>	North Wales	BCU	<b>12-15</b>

- EPs may need to be creative with marketing strategies to ensure there are sufficient quality applicants to fill commissioned places.

### Lot 16 – Dental Hygiene & Therapy

Sub-lot Number	Location	Health Boards Covered	Required Model of Education Delivery and Range of Commissioning Numbers per year		
			Full Time BSc Provision Dental Hygiene	Full Time BSc Provision Dental Hygiene and Therapy	Total
<b>16a</b>	South, West and Mid-Wales	C&V, AB, CTM, POW, SB, HD	18-23	10-13	<b>28-36</b>
<b>16b</b>	North Wales	BCU	12-15		<b>12-15</b>

- EPs must secure Placements across all of the lot area based on need, as guided by the Placement Plan.

### Lot 17 - Physicians Associates

Sub-lot Number	Location	Health Boards Covered	Required Model of Education Delivery and Range of Commissioning Numbers per year
			Full Time Post Graduate Diploma /MSc Provision
<b>17a</b>	South, West and Mid-Wales	C&V, AB, CTM, SB, HD (East, West and South), POW	<b>34-37</b>
<b>17b</b>	North Wales	BCU, North HD	<b>18-20</b>

- EPs must ensure sufficient specialist Placements are secured to ensure Students achieve their learning outcomes.

## Lot 18 – Practitioner Training Programme Healthcare Sciences

Lot Number	Location	Health Boards Covered	Required Model of Education Delivery and Range of Commissioning Numbers per year	
			Full Time BSc Provision	
18	All Wales	AB, CTM, C&V, SB, HD, POW, BCU	Cardiac Physiology	23-26
			Assistant Practitioner Audiology	9-12
			HE Cert in Audiological Practice	14-17
			Respiratory and Sleep	4-7
			Neurophysiology	3-5
			Nuclear Medicine	1-3
			Radiotherapy Physics	1-3
			Clinical Engineering	4-7

- EPs must secure Placements across all of Wales based on need, as guided by the Placement Plan (a redacted copy is available in Appendix C).
- EPs must work with NHS Health Boards to recruit Salaried Students to Assistant Practitioner Audiology commissions.

## 5. EVALUATION

The key themes have already been previously identified in the Introduction to this document. It is intended that many of these areas will be tested in the evaluation of the bids. In order to ensure that contracts are awarded to the University submitting the best bid, Evaluation Teams are being developed with both internal HEIW staff and external partners. Evaluation teams will comprise,

- HEIW staff
- Health Board and Trust health professionals
- Ex-students
- Service users
- Academics from Health Professional Schools in England

The provision of such diverse and inclusive evaluation panels will ensure that:

- Health Board and Trust partners are part of the development and selection process
- The process is robust and will stand up to any challenge on contract award decisions
- A full range of skills, knowledge and experience will be deployed in the evaluation of each component

In addition, this approach represents a unique development opportunity for ambitious and skilled staff to engage in a major piece of strategic work which could enable new skills to be gained from the experience. Due to potential conflicts of interests, staff in Health Boards with honorary lecturing contracts with any University cannot be part of the evaluation process and all evaluators will need to attend an Evaluators Training Day and sign both a declaration of interest and confidentiality agreement (drafted by the Legal and Risk Solicitor assigned to the project). There is a process in place to scrutinise these.

There are currently 34 external evaluators that have agreed to be part of this process.

It is anticipated that each evaluator will dedicate approximately 3 weeks to this process. The 3 weeks is analysed as follows:

<b>Task</b>	<b>Timescale</b>	<b>Days</b>	<b>Note</b>
<i>Evaluator training day</i>	End of August / beginning of September 2020	1	
<i>Reading ITT and engaging shaping final questions</i>	September 2020	1	
<i>Reading bid submissions and scoring</i>	January to February 2021	13	This can be undertaken at the evaluators discretion but 2 days towards the end of February will be set so all evaluators can discuss scoring collectively in determining final scores

The questions to be addressed within the evaluation process are attached at **Appendix 3**.

## **6. PROCUREMENT CONTRACT BRIEFING PAPER**

The Procurement Contract Briefing paper is attached at **Appendix 4**. It provides a summary of the procurement and is a requirement that Procurement Services need to complete for sign-off by,

- a. Director of Procurement Services, NWSSP and
- b. Welsh Government

The document is included since it is an important part of the procurement process which the Board is asked to approve and for it to be submitted to the Welsh Government for approval.

## 7. FINANCIAL IMPLICATIONS

The pricing model for the new contract is set out below. This has been fully costed against a set of assumptions and the current pricing model. The modelling work and the research undertaken has previously been shared with the Executive Team and the ECQ Committee. In addition the draft pricing strategy was shared with potential bidders at a Pricing & Lotting Strategy event on 24<sup>th</sup> July 2020. Since that event the High Cost Subject Allowances have been updated.

The final pricing strategy is based on providing a fixed fee for all courses, set at £9,000 for the first three years. In addition High Cost Subject Allowances have been identified for some courses in order to ensure that the courses remain viable. Furthermore, a further allowance is available to meet the cost of recruiting and supporting students from areas of high deprivation in Wales. The fees are shown below:

<b>FEE CLASSIFICATION</b>	<b>Per annum</b>
<b>Full-time fee</b>	£9,000
<b>Part-time fee</b>	£6,750
<b>Post Graduate Diploma fee</b>	£9,000
<b>WIMD payment for eligible students</b>	£250

<b>COURSE</b>	<b>HCSA</b>
<b>Dental Therapy</b>	£9,720
<b>Dental Hygiene</b>	£9,720
<b>Midwifery</b>	£1,458
<b>Dietetics</b>	£1,458
<b>Occupational Therapy</b>	£1,458
<b>ODP</b>	£1,458
<b>Podiatry</b>	£1,458
<b>Radiotherapy - Diagnostic</b>	£1,458
<b>Radiotherapy – Therapeutic</b>	£1,458
<b>Speech &amp; language Therapy</b>	£1,458
<b>Health Sciences</b>	£1,458

Fees are to be fixed at these levels for the first 3 years of the contract and thereafter a process will be established to determine annual price movements beyond this timeframe. This approach de-risks the procurement process in terms of ensuring that any provider who is in a strong/single provider position cannot submit excessively high tender costs for service provision. The fees, together with the HCSA and WIMD allowance is intended to pay for all costs incurred by the University providers in meeting the obligations of the contract specification. There is not intended to be a separate funding mechanism for other costs such as capital, equipment or set up costs. There may be occasions whereby HEIW, at its discretion, will offer further funding for specific projects, service or equipment at year end, but this should not be understood as required as part of the contract agreement.

Widening access and providing opportunities for students who traditionally have not accessed higher education is a key theme within the Strategic Review. The ECQ team have reviewed the **Welsh Index of Multiple Deprivation** WIMD information (sponsored by the Welsh Government). WIMD is the official measure of relative deprivation for small areas in Wales. It identifies areas with the highest concentrations of several different types of deprivation. It is a National Statistic produced by statisticians at the Welsh Government.

Deprivation is the lack of access to opportunities and resources that should be available in society. This can be in terms of material goods or the ability of an individual to participate in the normal social life of the community. WIMD comprises eight separate domains (or types) of deprivation (income, employment, health, education, etc...). Each of the domains include several indicators of deprivation.

WIMD ranks all small areas in Wales from 1 (most deprived) to 1,909 (least deprived). The Index provides a way of identifying areas in the order of least to most deprived. It does not provide a measure of the level of deprivation in an area, but rather whether an area is more or less deprived relative to all other areas in Wales. [The WIMD 2019 Guidance](#) provides more information on use and interpretation of the results.

There are 191 areas classed as “most deprived”. It is proposed that a target of 5% of students are recruited from these areas. Universities will be provided with an additional £250 per student that are recruited from the identified 191 areas, per annum, in order to:

- a. Market courses within these 191 areas.
- b. To provide additional support for the students recruited from the identified 191 areas.

This funding will be ring-fenced and Universities will need to provide evidence of expenditure to support these students. This initiative is consistent with the Welsh Governments emerging policy called “**A More Equal Wales – Commencing the Socio-economic Duty**”

From the engagement that has been undertaken it is evident that this approach has been welcomed by Health Organisations since it supports the aim of providing a workforce that is representative of the population they serve and who understand the needs of their community. The benefits of this to the individual, the individual’s family, neighbours and friends can be significant and the ECQ Team will review the means by which the impact and outcomes of this initiative can be measured.

### **Impact of the fees on the overall commissions years 1 – 10**

The Financial implications and assumptions are set out below.

- 22/23 numbers based on 21/22 Education and Training Commissioning Plan submitted to the Welsh Government but, supported by legal and procurement, a range has been set for 22/23 commissions. This affords the opportunity to be responsive to service demands, arising from the IMTP’s and national priority areas.
  - The lower range is 4% below 21/22 levels

- The upper range is 13% above 21/22 levels
- Commissioning trends over the last 5 years have been reviewed and a 2% increase year-on-year to commissioning levels has been incorporated. It is difficult at this stage to predict growth or recession in the economy and how that impacts on the commissioning budget and numbers needed to run the Service but, with the trend included and the flexibility built into year 1 it provides a forecast planning assumption based on the best available information.
- Self-funders 8% of total commissions – therefore costs for these commissions are ignored.
- Attrition is assumed at 10% on average and split:
  - Year 1: 6%
  - Year 2: 3%
  - Year 3: 1%
- A pricing review mechanism is currently being developed so the assumption is
  - Prices under new contract are fixed for 3 years.
  - After 3 years, prices uplifted by 2% per annum. (This is only a financial modelling assumption factor, and not a contract requirement)

The financial model established for this procurement exercise determined the following costs for each academic year. It shows that against current budget levels uplifted each year by inflation, the annual difference in costs range between a 1% saving in year 1 and a 1.1% and 1.8% cost pressure for the academic period of years 2 - 10 (23/24 – 31/32). The financial gap therefore remains broadly consistent at below 2%.

Academic Years	22/23	23/24	24/25	25/26	26/27	27/28	28/29	29/30	30/31	31/32
TOTAL (SAVINGS) / COST PRESSURE	-779,866	1,131,829	965,174	1,600,503	1,622,580	1,644,698	1,666,841	1,688,992	1,711,135	1,733,250
% VARIANCE	-1.0%	1.4%	1.1%	1.8%	1.7%	1.7%	1.7%	1.6%	1.6%	1.5%
CUMULATIVE	-779,866	351,963	1,317,136	2,917,639	4,540,220	6,184,918	7,851,759	9,540,751	11,251,886	12,985,136

For the ITT and standard procurement papers, it has been essential to cost the total value of the new contract. This has been undertaken based on the minimum and maximum ranges of commissions over the 7 year contract and incorporating another 3 years which is an extension option built into the contract following a break clause.

ACADEMIC YEAR	22/23	23/24	24/25	25/26	26/27	27/28	28/29	29/30	30/31	31/32
<b>MINIMUM RANGE</b>	<b>year 1</b>	<b>year 2</b>	<b>year 3</b>	<b>year 4</b>	<b>year 5</b>	<b>year 6</b>	<b>year 7</b>	<b>year 8</b>	<b>year 9</b>	<b>year 10</b>
Cost of new Contract	27,916,881	54,236,337	80,839,359	84,634,220	87,972,157	91,443,321	95,053,061	98,806,944	102,710,758	106,770,526
Cumulative	27,916,881	82,153,218	162,992,577	247,626,797	335,598,954	427,042,274	522,095,335	620,902,279	723,613,036	830,383,563
<b>MAXIMUM RANGE</b>	<b>year 1</b>	<b>year 2</b>	<b>year 3</b>	<b>year 4</b>	<b>year 5</b>	<b>year 6</b>	<b>year 7</b>	<b>year 8</b>	<b>year 9</b>	<b>year 10</b>
Cost of new Contract	1,394,652	63,514,037	94,661,688	99,124,325	103,047,662	107,127,876	111,371,272	115,784,410	120,374,114	125,147,482
Cumulative cost	1,394,652	64,908,689	159,570,377	258,694,701	361,742,363	468,870,238	580,241,511	696,025,921	816,400,035	941,547,518

Notes:

- The costs of the first and second years are lower – this is because existing students will remain on the old contracts and contract prices, the new contract is only for new cohorts. Therefore it's not until academic year 3 that the full costs are realised
- It is unlikely that commissioning will be to the maximum level and may not reach 2% more, on average, year-on-year. However, there is a need to build in flexibility for growth. In addition it is crucial that the overall figures quoted provides coverage in terms of commissions in the latter years of the contract within the total envelope set out in the procurement paper.
- The price review mechanism that will be established from year 4 onwards of the contract is still being developed.

It is considered that this fee level support for the contracts to be established for this Education Service procurement will enable service providers to meet the service specifications established for the courses, fund the provision of higher cost education courses and recruit more students from disadvantaged communities. In addition, having standardised the price for all providers who return tenders for contracts in this procurement exercise, it will enable reviewers to evaluate providers and award contracts on the basis of the quality and comprehensiveness of their service offer. It is considered that this standard fee approach will facilitate the agreement of contracts that provide good quality education services to the specifications set and provide value for money in terms of containing cost to within 2% of current budgets, and having de-risked the process from excessive pricing.

## **8. GOVERNANCE ARRANGEMENTS**

The governance arrangements for the approval process for the Strategic Review are the subject of a separate more detailed paper at today's Board.

The Strategic Review has been overseen by a Project Board, chaired by the Director of Finance and Corporate Services. The Project Board comprises HEIW staff and senior members of NWSSP's Procurement and Legal & Risk Services Directorates.

There are two sub-groups, the Documentation Group and the Communications Group, both chaired by the Deputy Director for Education, Commissioning and Quality. The Project Board and two sub-groups have defined terms of reference and membership. Where deemed appropriate and on advice from Legal Colleagues documents have been marked as "Commercially Sensitive". Both the Project Board and two sub-groups utilised project management tools including Gantt charts and risk register.

The above mentioned suite of papers was presented to the HEIW Formal Executive Team meeting by the Deputy Director, Education, Commissioning and Quality on 10<sup>th</sup> September 2020.

All comments were addressed, and the papers were updated and discussed at the Education, Commissioning and Quality Committee on 16<sup>th</sup> September 2020 by the

Director of Finance and the Deputy Director, Education, Commissioning and Quality, and updated for presentation to the Board.

The Board is asked to note the governance around the approval process and the iterative process of ensuring the papers presented have received scrutiny of both the HEIW Executive Team and the ECQ Committee.

The major risks are:

If contactors fail to tender then students may be unable to access education regionally or within wales at all which will have future workforce implications and impact on HEIWs ability to deliver commissioned numbers.

*The mitigation is that, through extensive engagement lots and sub-lots have been created to meet Service need. The lotting strategy has been shared with all potential bidders and comments from the market have been considered and the lots have been altered to ensure that they are “attractive” to potential bidders. Each lot has been assessed in terms of its size to ensure that it is financially viable for Education Providers. The focus on IPE and students preparing for practice together requires Education Providers to carefully assess elements of different courses where synergy can be applied. Again, this reduces the risk of silo working encourages Education providers to consider smaller lots as well as larger lots.*

If covid-19 prevents HEIW from co-opting specialists from Health Boards and Universities to evaluate bids there may be a delay in evaluation or a limited evaluation panel which could raise risks of legal challenge.

*This report sets out the evaluation process and the diversity of evaluation teams. The provision of such diverse and inclusive evaluation panels will ensure that:*

- *Health Board and Trust partners are part of the development and selection process*
- *The process is robust and will stand up to any challenge on contract award decisions*
- *A full range of skills, knowledge and experience will be deployed in the evaluation of each component*

*There are currently 34 external evaluators that have agreed to be part of this process. So whilst a significant “spike” in covid-19 during January and February could potentially hinder and compromise the evaluation process currently, due to the number and commitment of evaluators the position appears deliverable. However, this situation will continue to be closely monitored.*

The latest iteration of the Risk Register is attached at **Appendix 5**.

The Services to which we are procuring fall within Regulation 74, Section 7, Chapter 3, and Part 2 of the Public Contracts Regulations 2015 (Regulations). There are specific less onerous provisions for social care, health, education and other types of procurement – classed as ‘the light touch regime’. The provisions apply to selection and award for these specific services and include the ability to be more flexible. Light

Touch Regime procurements should follow the principles of transparency and equal treatment and should be advertised and awarded via the OJEU, taking account of the overarching requirements of regulations 74– 77 (accurate description of requirements within documentation; estimated value). This procurement is being undertaken in accordance with the principles and will be advertising the tender opportunity via the OJEU.

## **9. NEXT STEPS**

The next step, once approved by the HEIW Board is to seek Ministerial Approval and issue the Invitation to Tender.

The Finance Department will continue to further refine its modelling work. Further consideration to be given to developing the pricing review mechanism to be utilised from years 4 onwards, with a comprehensive paper to be submitted to the Executive Team for consideration later in the year. This will also include a comprehensive risk / benefit analysis.

## **10. RECOMMENDATION**

The Board is asked to,

- Note the plan and procurement strategy
- Approve the ITT and Contract Specification
- Approve the Procurement Report for submission to the Director of Procurement Services in NWSSP and the Welsh Government

<b>Governance and Assurance</b>			
<b>Link to IMTP strategic aims</b> (please ✓)	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	✓	✓	✓
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
	✓	✓	✓
<b>Quality, Safety and Patient Experience</b>			
Underpins all aspects of the contract.			
<b>Financial Implications</b>			
Set out in the paper			
<b>Legal Implications (including equality and diversity assessment)</b>			
A Senior Solicitor from within Legal and Risk Services, NWSSP with a contract and commercial law background has been funded to support this work and has been part of developing the ITT and Contract Specification. In addition the Workforce, Equality and Diversity Officer within HEIW has been part of the project team from the inception of the project structure (May 2019).			
<b>Staffing Implications</b>			
A project team has been established and funded to deliver this piece of work. This includes admin support for the ECQ Team within the Nursing Directorate and dedicated procurement and legal support from NWSSP.			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
Set out in the paper and themes incorporated into the new contract			
<b>Report History</b>	NA		
<b>Appendices</b>	<b>Appendix 1:</b> presentation for the final stakeholder event held on 11 <sup>th</sup> September 2020. <b>Appendix 2:</b> ITT and the Service Specification. <b>Appendix 3:</b> the questions to be addressed within the evaluation process <b>Appendix 4:</b> the Procurement Contract Briefing paper <b>Appendix 5:</b> the Project Risk Register		



**GIG**  
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WALES

Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>24 September 2020</b>	<b>Agenda Item</b>	<b>3.2</b>
<b>Report Title</b>	<b>Strategic Equality Plan 2020-2024</b>		
<b>Report Author</b>	Emma Kwaya-James, Diversity and Inclusion Lead		
<b>Report Sponsor</b>	Foula Evans, Head of People & OD		
<b>Presented by</b>	Julie Rogers		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	To seek Board sign-off and approval for the publication of HEIW's first Strategic Equality Plan		
<b>Key Issues</b>	<p>Public sector organisations such as HEIW have a duty under the Equality Act 2010 (Statutory Duties) (Wales) Regulations 2011 (also referred to as 'the Welsh specific equality duties') to review its equality objectives every four years and publish a Strategic Equality Plan.</p> <p>Due to Covid-19 the Equality and Human Rights Commission have extended deadline for publication of Strategic Equality Plan 2020-2024 to 1<sup>st</sup> October 2020.</p> <p>The plan was discussed in draft at the Board development session in August 2020 and some adjustments made in light of feedback from members.</p>		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			<b>Approval</b> ✓
<b>Recommendations</b>	The Board is asked to approve the final draft and agree to its publication on 1 <sup>st</sup> October 2020 in line with statutory duties.		

## HEIW STRATEGIC EQUALITY PLAN (SEP)

### 1. BACKGROUND

- 1.1. In response to the Equality and Human Rights Commission (EHRC) report “Is Wales Fairer? The state of equality and human rights (2018)” Welsh Government highlighted common themes across the public sector and endorsed the recommendation for better joined up working across the sector as being critical to ensure value for money. By taking this approach, the group hope to lead the way in terms of effective partnership working and sharing of resources across the sector thus embracing the expectation of Wellbeing and Future Generations Act (2015); A Healthier Wales (2018); Is Wales Fairer? (2018) and reflective of Welsh Government’s Long-Term Equality Aims 2020-2024.
- 1.2. In October 2019 HEIW Executive signed off HEIW’s active involvement to be part of Wales first Public Body Equality Partnership and public consultation document. In November 2019 engagement events were held in North, South and West Wales. With public and stakeholder consultation taking place in January 2020. In February 2020 HEIW Executive agreed HEIW’s Strategic Equality Objectives with progression and final sign off scheduled for Board in March 2020, ready for publication on the 1<sup>st</sup> April 2020.
- 1.3. Following the outbreak of Covid-19 and subsequent extension of publication deadline by EHRC all SEP activity was put on hold until July 2020. Work was undertaken over the summer to ensure our equality objectives were still relevant in light of inequalities highlighted and amplified as a result of COVID-19. This work included internal engagement using focus group methodologies, and engagement with the Executive Team and resulted in positive endorsement of our draft objectives.
- 1.4. The draft Plan was presented at the Board Development session in August and was well received. Some adjustments have been made subsequent to that session as a result of the constructive feedback.

#### Next steps

- 1.5. Subject to the plan being approved for publication, the next steps for the organisation will be for all directorates to draft equality action plans between October-December that hook directly into the over-arching Strategic Equality Plan at Appendix 1.
- 1.6. These plans will need to be submitted to Executive Team by December 2020 ready for implementation in January 2021. Reporting on progress will fall in line with IMTP reporting and take place quarterly and will be reported to Board in line with normal governance.

## 2. GOVERNANCE AND RISK ISSUES

- 2.1. HEIW have a duty under the Equality Act 2010 (Statutory Duties) (Wales) Regulations 2011 to review its Equality Objectives every four years and publish a Strategic Equality Plan. On the advice of the Equality and Human Rights Commission (EHRC), HEIW is legally bound to set and publish its first Strategic Equality Plan 2020-2024 on 1<sup>st</sup> October 2020.

## 3. FINANCIAL IMPLICATIONS

- 3.1. None

## 4. RECOMMENDATION

- 4.1. The Board is asked to approve the final draft and agree to its publication on 1<sup>st</sup> October 2020 in line with statutory duties.

Governance and Assurance			
Link to IMTP strategic aims (please ✓)	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
		✓	✓
<b>Quality, Safety and Patient Experience</b>			
N/A			
<b>Financial Implications</b>			
None			
<b>Legal Implications (including equality and diversity assessment)</b>			
Equality Act 2010 Section Public Sector Equality Duty			
<b>Staffing Implications</b>			
No staffing implications noted, only positive effect fostering better communication and transparency			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
The above proposal will influence across all 5 ways of working as identified "The Well-being of Future Generations (Wales) Act 2015, 5 ways of working.			
<b>Report History</b>	Appendix 1 Strategic Equality Plan 2020-2024		

# Transforming the workforce for a healthier Wales

## Our Strategic Equality Plan 2020-2024

### Health Education and Improvement Wales



## Foreword

We are delighted to publish our first Strategic Equality Plan and Objectives 2020-2024 which sets out our intended direction of travel over the next four years to strengthen our approach in advancing equality, eliminating discrimination and fostering good relations between those who share a protected characteristic and those who do not. Our plan relates to our role as an exemplar employer, as well as the way we provide our services.

Through a values-based approach, we aim to deliver our services which are safe, sustainable and offer an inclusive and nurturing working environment for all our staff. Within the suggested objectives, the words, 'culture', 'inclusion' and 'wellbeing' are used in their broadest terms to encompass considerations in relation to Welsh Language and socio-economic influences.

This plan is an evolving document and we will review in line with our Integrated Medium-Term Plan 2020-23 and quarterly plans/reporting. Our staff have been fully engaged in the development of this plan and its objectives, and this co-production has meant that our culture, values and behaviours are reflected within the document.

The responsibility for implementing the plan and objectives falls to us all and we expect conscious engagement from all of our HEIW family. While there will be a strong emphasis on what we do internally, we are committed to ensuring it is reflected in our external approach throughout our organisation and embedded through all of our functions.

We believe that creating a fair and inclusive Wales is the right thing to do. We will work together to achieve our objectives and create a fairer, more equitable and inclusive environment for all.



Ms Alex Howells, Chief Executive



Dr Chris Jones, CBE, Chairman

## **Contents**

**Who we are?**

**What do we want to achieve and how will we deliver our equality objectives?**

**The Policy Content**

**Introducing our Strategic Equality Objectives and Strategic Equality Plan**

**Our Equality Objectives**

**Appendix 1 Strategic Equality Action Plan 2020-2024**

Final Draft

## Who we are?

We are a growing team of over 400 people working across Wales, within the 11<sup>th</sup> organisation in the NHS Wales family, as a Special Health Authority. We were established on 1st October 2018 by bringing together three key organisations for health: Wales Deanery; NHS Wales's Workforce Education and Development Services (WEDS) and the Wales Centre for Pharmacy Professional Education (WCPPE).

Sitting alongside health boards and trusts, Health Education and Improvement Wales's (HEIW) purpose is, to provide NHS Wales with a single body to develop an integrated and comprehensive approach to the planning and development of the health workforce and health education and training in Wales. Ultimately, to deliver improvements to safety and quality, for patients, staff and the system.

Our culture and the way we do business is very important to us. We want our workforce to be happy, healthy and engaged and we prioritise wellbeing and inclusion within HEIW, in line with the draft 'A Healthier Wales – A Workforce Strategy for Health and Social Care' and underpinned by Compassionate Leadership Principles.

We created a national award-winning Values and Behaviours framework prior to the formal establishment of the new organisation. Our staff came together as a team to develop our values and behaviours framework, which set the expectation and culture of our new organisation.

### **Respect for all**

### **Together as a team**

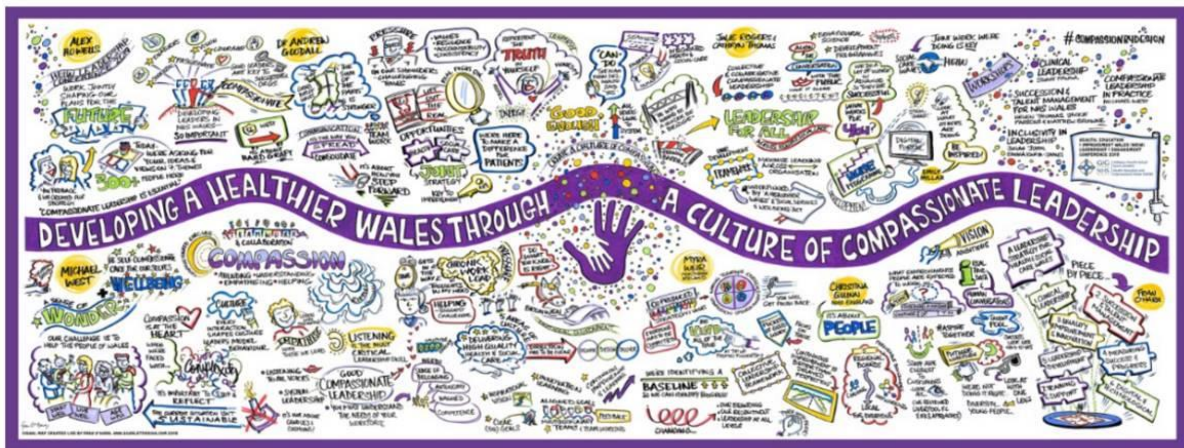
### **Ideas that improve**

We are delighted that this work won the HPMA 2019 award in the colleague engagement category.



We are committed to having a diverse workforce reflective of the people and communities of Wales. We actively encourage staff engagement through a number of forums, networks and groups including: Staff Open Forums; Health and Wellbeing Networks, Culture, Inclusion, Diversity and Social Groups including a thriving Welsh speaking community.

We value individual uniqueness and diversity and believe that this helps us to deliver services that reflect the needs of everyone in our community. Through the way we carry out our business, our individual actions, practices, policies and procedures, we aim to be an accessible and inclusive employer underpinned by Compassionate Leadership at all levels.



To find out how you could join our team press [here](#).



## **What do we want to achieve and how will we deliver our equality objectives?**

Through our guiding principles and behaviours, we are committed to delivering improvements against five key strategic equality objectives. These objectives have been developed collaboratively in partnership with a group of other public sector organisations (see page 10):

### **Objective 1 Increase workforce diversity and inclusion**

We will by 2024 continue to promote the diversity of our people, both within our organisation and our wider health community, to ensure that we have a workforce of the future, which is reflective of the population of Wales. We will take positive action to increase representation of people from diverse identities, backgrounds and cultures and will be able to demonstrate and evidence how we have removed barriers for underrepresented groups, including those living in poverty, to access meaningful employment within the health field.

### **Objective 2 Addressing pay gaps**

We will by 2024 take action to understand our pay gaps, and address and minimise the impact where possible, within the constraints of the national pay systems for the NHS in Wales. We will significantly improve the quality of the data we collect which will enhance our understanding and provide evidence to inform programmes to ameliorate issues identified.

### **Objective 3 Engage with the community**

We will by 2024 have strengthened our collaborative work with our partners, stakeholders, and communities to improve equity in education, training, safety and quality of the services we provide both directly and indirectly for the people of Wales. We will be able to demonstrate this through our work with underrepresented groups in our NHS, education, careers and widening access communities.

### **Objective 4 Ensure equality is embedded into the way that we procure and commission services and goods**

We will by 2024 ensure those from whom we commission services, reflect our strategic equality plan, values and behaviours in the way they conduct their business. We expect equality, inclusion, wellbeing and Welsh Language requirements to be embedded into their functions and will be able to evidence this.

### **Objective 5 Ensure service delivery reflects individual need**

We will by 2024 be able to evidence how our collaborative work with communities and stakeholders has enabled us to shape and improve equity in education, training, safety and quality of services. Our 'offer', procedures and systems will be reflective of the different needs of our partners including staff, students, trainees and SAS Doctors.

We are committed to ensuring our strategic equality plan and objectives are delivered through compassionate leadership principles and behaviours. By December 2020, our directorates will be developing specific plans to support this strategic equality plan with implementation programmed into forward planning cycles and commencing January 2021.

## Policy context

Along with our Public Sector Equality Duties as set out in [Equality Act 2010 \(Statutory Duties\) \(Wales\) Regulations 2011](#) there are a number of national strategies and policy drivers which have shaped our journey and development of our strategic objectives. These include:

[Wellbeing and Future Generations \(Wales\) Act 2015](#)

[A Healthier Wales \(2018\)](#)

[Is Wales Fairer? \(2018\)](#)

[A Healthier Wales, A Workforce Strategy for Health & Social Care \(Draft\)](#)

[Health and Social Care \(Quality and Engagement\) \(Wales\) Bill 2019](#)

[Welsh Governments Strategic Equality Plan 2020-2024](#)

[Socio-economic Duty Wales](#)

all of which set out to enable the transformational change required to deliver closer integration, a culture of continuous improvement, and a more equal, fair and healthier Wales; reflective of Welsh Government's Long- Term Equality Aims 2020-2024.

## Public Sector Equality Duty -The General and Specific Duty

As a public body, we have a responsibility to ensure we consider how we can positively contribute to a fairer society through advancing equality and good relations between all in our day to day activities and the design of our policies and services.

When making decisions and delivering services, we must have due regard to:

- Eliminate discrimination, harassment, victimisation and other conduct that is prohibited by or under the Act;
- Advance equality of opportunity between persons who share relevant protected characteristics and persons who do not;
- Foster good relations between persons who share relevant protected characteristics and persons who do not.



When thinking about the specific duties which underpin the general duties, we will set out clear steps that we will take in order to demonstrate our actions in meeting and supporting increased performance of the general duty.

We will therefore ensure specific care is given to:

- Removing disadvantages suffered by persons who share a relevant protected characteristic and are connected to that characteristic;
- Meeting the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it; and
- Encourage persons who share a protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

More information on the Public Sector Equality Duty please press [here](#).

When referring to the legal term 'protected characteristics' it is against the law to discriminate, harass and or victimise someone because of their:

- Age
- Disability
- Gender identity
- Pregnancy & maternity
- Marriage and civil partnership
- Race
- Religion or belief
- Sexual orientation

At HEIW we also consider those who are Carers; whose first language is Welsh and those living in poverty when assessing the impacts of our work.

We have adopted an Integrated Equality Impact Assessment process. Through this approach we recognise and understand that individuals don't just have a single characteristic and that the interconnected nature of these multiple characteristics, referred to as [intersectionality](#), can combine to create unique modes of discrimination, barriers and experiences for people.



## Consultation and engagement journey

Throughout October 2019 and January 2020, we engaged with service users including staff, patients and members of the public through a variety of internal and external mechanisms including focus groups; direct community engagement events and consultation events across Wales. These events and feedback helped shape the Public Body Equality Partnership's – of which we are a member (see page 10) - final set of objectives in March 2020.

Due to the crisis response required at the start of Covid-19 breakout, HEIW along with public sector partners received notice that PSED reporting deadlines had been extended by the Equality and Human Rights Commission from the 1<sup>st</sup> April 2020 to the 1<sup>st</sup> October 2020.

Our journey from March 2020 has seen unprecedented events taking place which have shaped our thoughts and renewed our understanding of entrenched inequalities in society. In July and August 2020, we undertook a fresh internal review of our commitments. With the purpose of checking relevance, opportunities to strengthen actions and gaps.

The feedback from these sessions reaffirmed that our five high-level objectives remain relevant and provided opportunities for us to strengthen our actions.



## Introducing our Strategic Equality Objectives and Strategic Equality Plan

As a new organisation we set out on our journey with our first reporting date set for the 1<sup>st</sup> April 2020 leaving us 12 months to create our first 4-year Equality Plan. Following a period of initial research and engagement at national equalities events and networks, we set course with clear understanding of the recommendations made by ['Is Wales Fairer report, 2018'](#), in particular the recommendation for better joined up working across the public sector, as being critical to ensure value for money.

This understanding informed our decision early on, to work collaboratively with a number of public sector partners, to develop a suite of high-level strategic equality objectives. With the expectation that each partner will commit to working together to deliver shared objectives and clearly action their intent within their own organisation's Strategic Equality Plan and Objectives. This partnership is known as Wales's Public Body Equality Partnership.

We have set out below each strategic equality objective with some high-level actions that make up our strategic equality plan. Underneath each objective and list of actions, there is an overarching indicative measurement of how we intend to review our performance. To bring our strategic equality plan into reality, our directorates will ensure that they operationalise their supporting equality action plans to each strategic action, with clear reporting mechanisms in place to review, build and report upon progress, in line with our internal and external reporting requirements. This will ensure that we embed our strategic equality approach into all of the functions, both internally and externally facing. Directorate plans will be produced by the end of December 2020 with implementation required from January 2021.

Objective 1	Actions
<p>Increase workforce diversity and inclusion</p> <p>We will by 2024 continue to promote the diversity of our people, both within our organisation and our wider health community, to ensure that we have a workforce of the future, which is reflective of the population of Wales. We will take positive action to increase representation of people from diverse identities, backgrounds and cultures and will be able to demonstrate and evidence how we have removed barriers for underrepresented groups, including those living in poverty to access meaningful employment within the health field.</p>	<p>Promote a culture of inclusivity and compassion, reflective in our values and behaviours.</p> <p>Take an intersectional approach to understanding equality, diversity and inclusivity impacts when planning our work and services.</p> <p>Embed Integrated Equality Impact Assessment framework and governance throughout organisation.</p> <p>Build on the wellbeing opportunities for staff that supports their physical, emotional and digital wellbeing.</p> <p>Establish mechanisms for securing and measuring clear evidence of organisational impact on workforce diversity and inclusion.</p>

	<p>Develop a systemic approach to building a framework and program of continuous work to address unconscious bias in the workplace.</p> <p>As an exemplar employer, review our local recruitment &amp; selection processes, procedures and practices to attract individuals from diverse backgrounds, cultures and identities.</p> <p>Develop clear workforce and training initiatives and programmes that can reach out to service users and the community (including unrepresented groups). Such as mentoring and reverse-mentoring programmes, apprenticeships, internships and graduate schemes.</p> <p>Ensure that our careers and widening access programmes support our objective to increase workforce diversity and inclusion.</p> <p>Develop, deliver and evaluate learning and development programmes which raise awareness of equality, inclusion, well-being and Welsh Language within our workforce and for our Board.</p>
<b>Measurement Indicator</b>	
<p>Promote HEIW as an exemplar employer with external accreditation/recognition with Stonewall Workplace Equality Index, Disability Confident, Time to Change, Achieve Great Places to Work accreditation; Staff Survey results; Annual Pay Report; increased representation from under-represented groups</p>	

<b>Objective 2</b>	<b>Actions</b>
<p>Addressing pay gaps</p> <p>We will by 2024 take action to understand our pay gaps, and address and minimise the impact where possible and within the constraints of the national pay systems for the NHS in wales. We will significantly improve the quality of the data we collect which will enhance our</p>	<p>HEIW staff pay is almost entirely governed by national All-Wales contracts, with pay awards set annually by Welsh Ministers.</p> <p>Within this context, we will strive to promote a working environment where our pay gaps are understood, and we</p>

<p>understanding and provide evidence to inform programmes to ameliorate issues identified.</p>	<p>look for opportunities to ameliorate differences and barriers where possible.</p> <p>Pay can be an influencer on individuals' perception of value and therefore we will take action to mitigate gaps, where it is in our gift to do so, thereby ensuring wellbeing and inclusion is at the heart of our culture.</p> <p>We will raise awareness of the importance of staff completing data on the electronic staff record to support better analysis and action.</p> <p>We will promote wider participation and access to education, training and careers for individuals from underrepresented groups, to help break through the pay and progression barriers and address inequalities in the wider system.</p> <p>Create opportunities for leadership and graduate schemes to be co-produced, to foster confidence of inclusivity rather than tokenism, and to support progression (including pay) of under-represented groups.</p>
<b>Measurement Indicator</b>	
<p>We will analyse and monitor our progression internally in relation to this objective, including against our Annual Pay Gap Report.</p> <p>We will undertake surveys, evaluation and reviews of programmes aimed at addressing the external environment. This could include collating data on uptake of professional development opportunities and different work patterns at different levels.</p>	

Objective 3	Actions
<p>Engage with the community</p> <p>We will by 2024 have strengthened our collaborative work with our partners, stakeholders, and communities to improve equity in education, training, safety and quality of the services we provide both directly and indirectly for the people of Wales. We will be able to</p>	<p>Create and maintain effective networks of service users, partners and third sector organisation.</p> <p>Develop and use a variety of tools to support community engagement including networks, platforms, forums,</p>

<p>demonstrate this through our work with underrepresented groups in our NHS, education, careers and widening access communities.</p>	<p>think tanks, contract reviews, pulse surveys etc.</p> <p>Embed engagement and consultation into initial workforce planning process and throughout.</p> <p>Ensure our digital learning platforms, materials and communication methods are developed with equality, diversity and accessibility at the forefront of planning, delivery and governance.</p> <p>Use our community engagement methods and approaches to help shape our careers and widening access programmes and ‘offers’; ensure active service user involvement in co-production, shaping and monitoring.</p> <p>Develop and deliver an annual learning programme celebrating service user engagement and how service user diversity and inclusion has assisted with address inequalities in health and improved practice.</p>
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#### Measurement Indicator

Produce evidence of engagement with our community (including explicit contributions from underrepresented groups),

Evaluate our strategies, policies, decisions and practice using the ‘You said - We did’ approach.

[to follow: define education outcomes data to be collated]

Objective 4	Actions
<p>Ensure equality is embedded into the way that we procure and commission services and goods.</p> <p>We will by 2024 ensure those from whom we commission services, reflect our strategic equality plan, values and behaviours in the way they conduct their business. We expect equality, inclusion, wellbeing and Welsh Language</p>	<p>Embed equality, inclusion, wellbeing and Welsh Language requirements into our procurement and commissioning processes.</p> <p>Share good practice across the organisation in commissioning process and practices where equality, inclusion,</p>

<p>requirements to be embedded into their functions and will be able to evidence this.</p>	<p>wellbeing and Welsh Language has played a central role.</p> <p>Create clear and timely mechanisms for service users to share their experience of services and goods that we procure and commission. Use the feedback to positively influence and shape future procurement and commissioning activity.</p> <p>Capture data and evidence on service user engagement.</p> <p>Develop and deliver procurement learning and development programmes which raise awareness of the importance of equality, inclusion, well-being and Welsh Language within this activity.</p> <p>Collate evidence and measures of direct input and impact on service users including for example underrepresented groups staff, students, trainees and SAS Doctors.</p>
<p><b>Measurement Indicator</b></p> <p>Clear evidence of input and influence of service users</p> <p>Procurement and commissioning activity is compliant with the expectations laid out and helping to deliver our strategic equality aims</p> <p>Service user surveys support our internal assessments and evaluations</p>	

Objective 5	Actions
<p>Ensure service delivery reflects individual need</p> <p>We will by 2024 be able to evidence how our collaborative work with communities and stakeholders has enabled us to shape and improve equity in education, training, safety and quality of services. Our 'offer', procedures and systems will be reflective of the different needs of our partners including staff, students, trainees and SAS Doctors.</p> <p>We are committed to ensuring our strategic equality plan and objectives are delivered through compassionate leadership principles and behaviours. By December 2020, our directorates will be developing specific plans to support this strategic equality plan with implementation programmed into forward planning cycles and commencing January 2021.</p>	<p>Develop effective means of sharing good practice and learning across the organisation, that promotes a culture of continuous improvement to practice, addressing inequalities in service delivery, as a result of identification of being a member or ally of underrepresented groups and communities.</p> <p>Produce clear and effective means of engaging services users from underrepresented groups, with clear evidence and measure of direct input and impact for all service users including patients, staff, medical and non-medical) students, trainees and SAS Doctors.</p> <p>Undertake research and engagement to identify the need for and develop targeted initiatives to widen participation and access to education, training and careers for individuals from underrepresented groups. Ensure active service user involvement in co-production, shaping and monitoring. This could include exploration of e.g. bespoke support to individuals from BAME background to break through recruitment barriers and/or opportunities.</p> <p>Create opportunities to implement programmes of work that directly address Differential Attainment across our staff, students and trainees. With clear evidence and measures of direct input and impact on service users including patients, staff, students, trainees and SAS Doctors.</p> <p>Develop, deliver and evaluate learning and development programmes which raise awareness of equality, inclusion, well-being and Welsh Language</p>

	<p>Use the organisation's networks (see objective 1) to ensure service users from under-represented groups are actively consulted in development of new initiatives.</p> <p>Organise opportunities for the Board to engage directly with service users, individuals and under-represented groups.</p> <p>Develop and deliver an annual learning programme celebrating service user engagement and how service user diversity and inclusion has assisted with address inequalities in health and social care and improving practice.</p>
<p><b>Measurement Indicator</b></p> <p>Evaluate workplace culture through external evaluators such as Great Places to Work  [to follow: define differential attainment targets &amp; targeted outcomes data to be collated]</p>	

## Appendix 1 – Strategic Equality Action Plan 2020 - 2024

### Year 1 Actions

1. Promote a culture of inclusivity and compassion, reflective of our values and behaviours
2. Embed Compassionate Leadership Principles and Behaviours into everything we do
3. Create opportunities to implement programmes of work that directly address Differential Attainment across our staff, students and trainees. With clear evidence and measures of direct input and impact on service users including patients, staff, (medical and non-medical) students, trainees and SAS Doctors
4. Create clear and timely mechanisms for service users to share their experiences and positively influence change, for example networks, platforms, forums, think tanks, contract reviews, pulse surveys
5. Take an intersectional approach to understanding equality, diversity and inclusivity impacts when planning our work and services
6. Ensure our digital learning platforms, materials and communication methods are developed with equality, diversity and accessibility at the forefront of planning, delivery and governance
7. Build on the wellbeing opportunities for staff that supports their physical, emotional and digital wellbeing
8. Clear evidence and measure of direct input and impact on service users including patients, staff, (medical and non-medical), students', trainees and SAS Doctors
9. Develop mechanisms for delivering 1<sup>st</sup> whole organisation annual learning programme, celebrating diversity and the opportunities that challenges offer us to grow in our journey for full inclusion
10. Develop, deliver and evaluate learning and development programmes which raise awareness of equality, inclusion, well-being and Welsh Language
11. Work to widen participation and access to education, training and careers for individuals from underrepresented groups. Creating opportunities throughout for active service user involvement in co-production, shaping and monitoring
12. Create opportunities for leadership and graduate schemes to be co-produced to foster confidence of inclusivity rather than tokenism

13. As an exemplar employer, review our recruitment & selection processes, procedures and practices to attract individuals from diverse backgrounds, cultures and identities
14. Deliver on accreditation pledges: Stonewall, Time to Change, Disability Confident

## Year 2 Actions

15. Implement systemic framework and approach to address unconscious bias in the workplace, through a variety of blended methods including digital and face to face webinars, talks, training including recruitment and selection, leadership
16. Develop and deliver an annual learning programme celebrating service user engagement and how service user diversity and inclusion, has assisted with addressing inequalities in health for underrepresented groups and communities
17. Review and deliver annual learning and development programmes which raise awareness of equality, inclusion, well-being and Welsh Language
18. Evaluate workplace culture through external accreditation, such as Great Places to Work

## Year 3 Actions

19. Nurture, create and review to maintain a safe environment where people are valued for their differences and in which the Welsh Language can flourish
20. Evaluate a systemic framework and approach to address unconscious bias in the workplace
21. Evaluate and deliver annual learning programmes celebrating diversity and the opportunities that challenges offer us to grow in our journey for full inclusion
22. Review and deliver co-produced annual learning programmes celebrating service user engagement and how service user's diversity and inclusion has assisted with addressing inequalities in health and social care for underrepresented groups and communities
23. Review and deliver annual learning and development programmes which raise awareness of equality, inclusion, well-being and Welsh Language

## Year 4 Actions

Commence next cycle of strategic equality planning ready for publication

Review of achievements against milestones

Final Draft



**Y GIG yn erbyn Trais**

**NHS Anti-Violence Collaborative**



pledged employer

**time to change**  
**Wales**

let's end mental health discrimination

cyflogwr ymrwymedig

**amser i newid**  
**Cymru**

rhown ddiwedd ar wahaniaethu ar sail iechyd meddwl

We would like to thank you for taking the time to read about our Strategic Equality Objectives and Plan.

We welcome all comments or questions on all aspects of this strategy and plan.

### Accessible Formats

If you require this publication in printed or alternative formats (large print Braille, audio, BSL and/or languages) please contact us using the details below.

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**GIG**  
CYMRU  
**NHS**  
WALES

Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>24 September 2020</b>	<b>Agenda Item</b>	<b>4.1</b>
<b>Report Title</b>	Report of the Director of Finance		
<b>Report Author</b>	Rhiannon Beckett		
<b>Report Sponsor</b>	Eifion Williams		
<b>Presented by</b>	Eifion Williams		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	To provide the HEIW Board with a report on the financial position for August 2020 (Month 05).		
<b>Key Issues</b>	HEIW has a statutory duty to break even at year end and this report should assist the Board, Executives and Budget Holders in understanding the financial position reported for Month 5 of the 2020-21 financial year and the actions needed to be in balance at year end.		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
	✓		
<b>Recommendations</b>	1. For the HEIW Board to note the financial position reported at month five and the underlying reasons for the key variances to budget.		

# **REPORT OF THE DIRECTOR OF FINANCE**

## **1. INTRODUCTION**

The report sets out the financial position as at the end of August 2020, reported against updated budgets. The delegated budgets have been derived from the 2020/21 Resource Plan which was drawn from the 2020-25 IMTP Financial Plan and further updated by the Allocation letter received from Welsh Government. The reported financial position of HEIW as at Month 5 is £1,483,615 underspent and the forecast year-end position reported to Welsh Government is that action will be taken to ensure that HEIW will be in financial balance.

## **2. BACKGROUND**

This report provides an update on the financial position for the period to the 31st of August 2020, and the report identifies the reasons for any financial variation against the budgets set. The COVID-19 pandemic and lockdown situation is continuing to impact on pay and non-pay budgets. Dialogue with Welsh Government in respect of managing the financial position is ongoing with another meeting scheduled at the end of quarter two. Ongoing consideration is being given by budget holders and service managers to re-profiling the Commissioned activity and this is likely to result in further amendments to the financial plan during 2020/21.

There is a need to consider this report together with the Performance Report provided to the Board. A range of actions have been undertaken by HEIW to work differently during the COVID-19 pandemic to ensure that the objectives and targets of the organisation in 2020/21 are being delivered. Whilst the organisation is underspending, the performance report indicates that the organisation is performing well against its objectives and targets despite the restrictions arising out of the pandemic.

## **3. PROPOSAL**

The Board is asked to note the financial position reported by HEIW for Month 5 and consider the summarised explanations of the key variations described for each Directorate.

## **4. GOVERNANCE AND RISK ISSUES**

HEIW has a statutory financial duty to break even at year-end and the Welsh Government will monitor the reported position in terms of this duty and also against the current year financial plan submitted within the 2020-23 IMTP.

## **5. FINANCIAL IMPLICATIONS**

### **5.1 Revenue Financial Position as at Month 05**

HEIW is reporting an underspend of £1,483K against profiled budgets as at 31st August 2020. The underspend position in Pay budgets is due to vacancies across the HEIW staffing establishments. The underspends in Non-Pay budgets are as a result of reduced training and education activity, and travelling costs as a result of the COVID-19 lockdown restrictions. The significant underspend in Commissioning budgets are primarily as a result of under recruitment or attrition from Healthcare Professional education courses and the underspending in Medical budgets are related to under recruitment to medical training grade posts and Pharmacy.

The month 5 position was reported to Welsh Government on day 5 and further detail has been shared through the monitoring return submitted on day 9 in accordance with the required WHC reporting timetable. The Monitoring Return submitted is included as Appendix 2.

The table below shows the high-level variance on the delegated budgets of the Executive Directors.



**GIG  
CYMRU  
NHS  
WALES**

Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

**As at 31st August 2020**

	Year to Date			Previous Month	
	Budget	Actual	Variance	Variance to Date	Movement
	£	£	£	£	£
<b>INCOME:</b>					
Welsh Government	(88,773,343)	(88,773,343)	0	0	0
Other Income	(235,687)	(195,382)	40,305	22,406	17,899
<b>Total Income</b>	<b>(89,009,030)</b>	<b>(88,968,725)</b>	<b>40,305</b>	<b>22,406</b>	<b>17,899</b>
<b>Expenditure</b>					
Board & Executive	680,783	637,890	(42,893)	(21,814)	(21,079)
Finance	385,648	376,209	(9,439)	(3,366)	(6,073)
Planning, Performance and Corporate Services	752,314	687,914	(64,400)	(25,888)	(38,512)
Digital and IT	1,954,344	1,913,778	(40,566)	(24,832)	(15,734)
Medical & Pharmacy	41,625,310	41,062,991	(562,319)	(527,409)	(34,910)
Nursing	42,825,978	42,078,431	(747,547)	(491,628)	(255,919)
Human Resources and Organisation Development	911,019	854,265	(56,754)	(53,742)	(3,012)
<b>Sub-Total Expenditure</b>	<b>89,135,396</b>	<b>87,611,477</b>	<b>(1,523,919)</b>	<b>(1,148,679)</b>	<b>(375,240)</b>
<b>Total</b>			<b>(1,483,615)</b>	<b>(1,126,273)</b>	<b>(357,342)</b>

The following table provides a further breakdown of the financial variance by expenditure category:

Directorate	Income	Expenditure			Total
		Pay	Non Pay	Commissioning	
	£	£	£	£	£
Board and Executive		(13,073)	(29,820)		(42,893)
Chief Executive Reserve			0		0
Finance		(4,793)	(4,646)		(9,439)
Planning, Performance and Corporate Services		3,805	(68,205)		(64,400)
Digital and IT		(14,266)	(26,299)		(40,566)
Medical & Pharmacy	40,305	(189,763)	(282,603)	(89,953)	(522,015)
Nursing	0	(52,432)	(2,621)	(692,493)	(747,547)
Human Resources and Organisation Development		(12,169)	(44,585)		(56,754)
<b>Total</b>	<b>40,305</b>	<b>(282,692)</b>	<b>(458,781)</b>	<b>(782,446)</b>	<b>(1,483,615)</b>

The analysis attached as Appendix 1 provides the key reasons for the underspending, by Directorate. The key reasons for the underspend variances are vacancies against budgeted staffing levels for Pay Budgets, lower costs in education and training support activity and travelling expenses in Non-Pay budgets and lower placements than planned in commissioned education and training placements budgets.

It is expected that HEIW will manage to ensure that an overall balanced financial position is achieved at year end.

## 5.2 Capital

No capital expenditure has been incurred to date in 2020/21. Meetings are being held with budget holders during August and September to prepare the capital programme for Executive approval.

The £46k allocation for the procurement of the pharmacy e-portfolio system was carried forward into 2020/21 due to no suppliers bidding for the project in 2019/20. The requirements of the scheme are currently being reviewed.

## 5.3 Balance Sheet

The balance sheet as at 31st August 2020 is shown below:

	2020/21 Opening Balance £000s	31 <sup>st</sup> August 2020 £000s	Movement £000s
<b>Non-Current Assets:</b>			
Fixed Assets	2,595	2,386	(209)
<b>Current Assets:</b>			
Trade and other receivables	1,074	1,011	(63)
Cash & bank	7,465	2,763	(4,702)
<b>Total Assets</b>	<b>11,134</b>	<b>6,160</b>	<b>(4,974)</b>
<b>Liabilities:</b>			
Trade and other payables	(7,328)	(10,270)	(2,942)
Provisions	(130)	(130)	0
<b>Total Liabilities</b>	<b>(7,458)</b>	<b>(10,400)</b>	<b>(2,942)</b>
	<b>3,676</b>	<b>(4,240)</b>	<b>(7,916)</b>
Financed by:			
General Fund	3,676	(4,240)	(7,916)
<b>Total Funding</b>	<b>3,676</b>	<b>(4,240)</b>	<b>(7,916)</b>

- The movement on non-current assets reflects depreciation charged during 2020/21. The total capital allocation for 2020/21 is £151k as a result of the carry-forward of £51k from 2019/20. Expenditure plans have not yet been finalised for consideration by the Executive Team.
- Trade and other payables total £10.3m, an increase of £2.9m since the start of the financial year. The main balances include:
  - Accruals for the Medical division in the month total £3.8m. Some £2.2m of this balance relates to the costs of GP Trainees in August that has not yet been paid. A further £0.7m is an accrual regarding pharmacy commissioning, £0.6m is an accrual of student salary costs in health boards.
  - Accruals in the month for the Non-Medical division total £4.9m, including £1.6m for NHS Wales (including student salary reimbursement) and £3.2m for non-NHS Wales costs (Primarily University invoices including reimbursement of bursaries, travel costs etc.).

- Other balances include:
  - £0.5m for payroll related accruals – Pension & HMRC payments made the month following the payroll.
  - £0.5m for technical accounting accruals e.g. annual leave accrual carry-forward.

Resource allocation funding of £22.5m was requested and received from Welsh Government in August 2020. The bank balance at the end of the month was £2.7m, which is above the £1m internal target that HEIW has set. This is due to the recovery of University expenditure of approximately £1m during the month, and a number of anticipated invoices were not received for payment during the month.

#### 5.4. Public Sector Payment Policy (PSPP)

All NHS bodies are expected to meet the Public Sector Payment Policy, which requires NHS organisations to pay 95% of all invoices within 30 days and is based on a cumulative position. For the period from the 1st April to the 31st August 2020, HEIW has paid 92.08% of non-NHS invoices within this target (90.34% reported for Month 4). A breakdown of the position, along with a comparison to month 5 for 2019/20 is given below:

<b>Non-NHS Invoices PSPP Performance 2019/20 &amp; 2020/21 - By Number of Invoices (Target of 95%)</b>								
	2019/20				2020/21			
	Total Number	Total Passed	Total Failed	% Passed	Total Number	Total Passed	Total Failed	% Passed
April	489	467	22	95.50	354	334	20	94.35
May	312	301	11	96.47	311	236	75	75.88
June	502	486	16	96.81	453	412	41	90.95
July	806	777	29	96.40	404	393	11	97.28
August	456	431	25	94.52	385	381	4	99.00
<b>Cumulative</b>	<b>2,565</b>	<b>2,462</b>	<b>103</b>	<b>95.99</b>	<b>1,907</b>	<b>1,756</b>	<b>151</b>	<b>92.08</b>

There has been a significant improvement in the PSPP payment rate during recent months and the backlog of invoices resulting in the failures earlier in the year have been cleared. Work is on-going to maintain and further improve the PSPP performance in HEIW including:

- A PSPP dashboard has been developed which facilitates the analysis of payment performance at a directorate and cost centre level. This is presented monthly at one of the weekly Finance Team meetings thereby allowing business partners to review and deal with any emerging issues.
- Trackers to monitor invoices on hold are updated regularly and where issues remain these are highlighted and discussed with the relevant team.

## 6. RECOMMENDATION

The Board is asked to note the financial position reported for HEIW at month 5, the summarised explanation of key variations by Directorate, the Capital position, Balance Sheet, PSPP performance.

<b>Governance and Assurance</b>			
<b>Link to IMTP strategic aims</b> <i>(please ✓)</i>	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
<b>Quality, Safety and Patient Experience</b>			
There are no implications for Quality, Safety and Patient Experience			
<b>Financial Implications</b>			
The financial implications are set out above in the body of the report.			
<b>Legal Implications (including equality and diversity assessment)</b>			
HEIW has a statutory responsibility to break even at year end the report sets out the financial position for August 2020. There are no equality and diversity implications of this report.			
<b>Staffing Implications</b>			
There are no staffing implications of this report.			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
The report briefly describes how HEIW are seeking to adopt a sustainable approach to financial management that will enable HEIW to meet its long term objectives.			
<b>Report History</b>	The report references and updates the previous finance update shared with the HEIW Board in August 2020.		
<b>Appendices</b>	Further detail is included in Appendix 1.		

## **REPORT OF THE DIRECTOR OF FINANCE**

The following analysis of the key underspends, by Directorate, is provided below:

### **1. Board and Executives**

- An underspend on pay is as a result of 2 WTE vacancies, the Information Governance Officer has been appointed and is due to start in September, the advert for the PA role has just closed and appointment to the Interim Director of Nursing post at less than 1 WTE also contributes to the underspend. The year to date underspend has again been reduced in month 5 by the re-purposing of £1m of budget phased across the year to support activities required to enable trainees to progress as a result of the Covid-19 pandemic.
- An underspend on Non-Pay of £29.8K is due to lower than budgeted travel and subsistence costs and training expenses as a result of the Covid-19 pandemic and lockdown, which are partly offset by increased translation costs.

### **2. Finance**

- The underspend on pay budgets of £3.4k is as a result of two vacancies within the team. The underspend associated with these vacancies would ordinarily have been offset by the costs of agency staff but as a result of the Covid-19 pandemic and lockdown the reliance on agency staff has reduced. The underspend has again been reduced in month 5 by the re-purposing of £1m of budget phased across the year to support activities to enable trainees to progress as a result of the Covid-19 pandemic and other new commitments.
- There is a favourable variance of £4.6K in Non-Pay that is predominantly related to lower than anticipated travel and subsistence costs and lower than budgeted bank charges.

### **3. Planning, Performance and Corporate Services**

- There is an adverse variance against the Pay budgets of £3.8K as a result of 1 wte vacant post that has been filled by an agency member of staff. Recruitment to the post is expected in January.
- There is an underspend of £68.2k against non-pay budgets as a result of charges for utilities and other variable costs associated with Ty Dysgu, such as photocopying charges, being lower than budgeted. There has also been a VAT rebate from 2019/20 following EY review.

### **4. Digital and IT**

- There are a number of vacant posts within the team created an underspend of £14.3k. Appointment has been made to the Head of Digital and Head of Cyber posts with further recruitment planned for August, September and October. Notification that another two posts will shortly become vacant as a result of staff members leaving has also been received. The underspend on pay budgets has again been reduced in month 5 by the re-purposing of £1m of budget to support activities to enable trainees to progress as a result of the Covid-19 pandemic and other commitments.

- There is an underspend against non-pay budgets of £26.3k as a result of lower than anticipated travel and subsistence costs and underspend on intrepid development days and Office 365 licence take up by trainees. The planned migration from Cardiff University servers to Azure cloud-based servers has also been delayed resulting in a delay to the set up and migration costs.

## **5. Medical and Pharmacy**

- There is an adverse variance of £40.3k against the other income target as a result of lower than anticipated income from revalidation and CPD courses for Dentists and GPs.
- The underspend on pay of £189.8k is as a result of a number of administration and clerical vacancies across a range of teams which are only partly offset by agency costs. There are also vacancies in clinical lead roles including the SAS lead, lead for Simulation and Deputy Foundation lead.
- The underspend on non-pay of £282.6k is as a result of lower than anticipated spend on training expenses, lecture fees and travel and subsistence in the year to date. Also, GP appraisals have been suspended in the first six months of the year creating a £194k underspend. Virtual sessions delivered through the Hamnet Street contract at a lower cost than face to face sessions also contribute to the underspend although the number of sessions is increasing and lower spend than budgeted on lay representatives offset by an increasing spend on supernumerary posts.
- Commissioning budgets are underspent by £89.5k in month. The underspend is predominantly due to a variance of £83.5k in respect of under-recruitment to training grade posts, £70k underspend due to lower activity in training expenses and training, travel and subsistence and student salary reimbursements in Pharmacy budgets, underspend at £41.7K in the PGMDE budget and £10.8k in Welsh Clinical Academic Training. An overspend on GP training reported for the first time in month 5 is as a result of the notification of twelve extensions.

## **6. Nursing**

- The underspend in Pay budgets of £52.4K relates predominantly to the delay in appointing to senior posts within the nursing team and within the Workforce Modernisation team that has now transferred into the Nursing Directorate. The start date for the Head of Science post is still unconfirmed at this point.
- Non-Pay budgets are mainly provided for Commissioning expenditure on education and training contracts, student salary and bursary costs along with disability payments, training, travel and subsistence and expenses. In total, an underspend of £692K is reported in month 5 for Commissioning budgets for the following reasons:
  - The Commissioning budget is based on the existing student cohort in the system and the commissioned student numbers for 20/21. The underspend and hand back to WG reported in month 4 of £3.9m was as a result of the following factors:-

	Forecast Outturn	Notes
Spring 2020 co-hort under-recruitment	£1m	1
Student Salaries	£0.5m	2
Self Funding Students	£1.6m	3
Delayed Course Starts	£0.7m	4
<b>Total</b>	<b>£3.9m</b>	

### Notes:

1. Under-recruitment to year 1 of the Spring 2020 cohort which would not have been known at budget setting.
  2. Underspend in respect of student salary re-imbursement as a result of under-recruitment to certain courses in the Sept 2019 to August 2020 co-hort.
  3. Underspend in contract fees and bursary as a result of student choice to self-fund in the Sept 2019 to August 2020 co-hort.
  4. Delayed course starts as a result of Covid 19.
- Additional underspend on commissioning budgets of £692k is reported in month 5 as a result the most recent information on numbers of students starting years two and three in the Sept 2020 to August 2021 cohort and variation in student salary and bursary payments budgeted on average rates but subject to means testing.
    - The other non-pay budgets are related to travel and subsistence and other expenses of the Nursing team which are of minimal value and there is a small underspend of £2.6k in month.

## 5. Human Resources and Organisation Development

- There are a high number of vacancies at 10.7 wte across the core budgets within the Directorate with only 1.7 wte offset by agency staff. The underspend on pay budgets has again been reduced in month 5 by the re-purposing of budget to support activities to enable trainees to progress as a result of the Covid-19 pandemic and other commitments
- A Non-Pay variance of £44.6K is predominantly due to underspends on training, consultancy, professional fees and conference budgets largely due to the impact of Covid-19 restrictions.

## **Monitoring Returns – Month 5 2020/21**

### **DIRECTOR OF FINANCE COMMENTARY**

#### **1. Actual Year to Date and Forecast Under / Overspend 2020/21**

HEIW have established a balanced financial plan for the current financial year as part of the approved 2020/21 to 2022/23 IMTP. The reported position for August 2020 (Month 5) for HEIW is a cumulative surplus of £1,484k and a full-year break-even position.

Ongoing consideration is being given by budget holders and service managers to re-profiling due to the impact of COVID 19. Commissioning activity and this is likely to result in further updates to the financial plan for 2020/21.

There are no assumptions in respect of unconfirmed income from other Welsh NHS organisations and there are no unallocated contingencies or reserves included within our reported position.

#### **2. Movement (Table A)**

Table A has been completed in line with the 3 year IMTP.

Due to COVID-19 there have been delays in the start of some courses commissioned by the nursing directorate, which it is estimated will result in a reduction in expenditure of approximately £719k in 2020/21. **Underlying Position (Table A1)**

This table does not need to be completed until month 6.

#### **3. Risks (Table A2)**

HEIW has previously included in its narrative an unquantified risk of students selecting bursary or student loans to fund their courses, and uncertainty over the student numbers on funded courses.

There is a new risk this month arising from the additional students that have been recruited to courses because of the change in determining A Level grades. The final impact amount is yet to be fully quantified, but is likely to be substantial. HEIW will determine further into the year, when Universities will confirm the actual numbers that have taken up their courses, as to whether we need additional funding or if it can be contained by utilising the underspend currently being reported in-year.

#### **4. Monthly Positions (Table B)**

Table B shows the HEIW position as at month 5 analysed by Income, Pay, Non-Pay and Commissioning Expenditure (included within Line 16 'Other Private & Voluntary Sector').

#### **5. Pay & Agency (Table B2)**

Pay costs are anticipated to increase during the year as the recruitment process for vacant posts progresses.

Agency spend is incurred as a result of filling some of the vacant posts in the agreed HEIW structure with agency staff until recruitment processes enable substantive appointments. As a result of the COVID pandemic:

- Recruitment for a number of posts has been paused/delayed.
- A change in the service requirements has reduced the reliance on agency staff.

It is anticipated that the costs of agency staff will increase during the year as service provision and requirements return to deliver the requirements of the IMTP.

#### **6. COVID-19 (Table B3)**

HEIW has previously identified in the month 4 return that there is an estimated reduction in expenditure of £719k as a result of the delayed start to a number of courses commissioned by the nursing directorate. This has been reflected in line 119 of Table B3.

The Board has also approved the re-purposing of £1m to address the later year effects of the pandemic to recover training and education opportunities that have been adversely affected. This adjustment is not yet reflected within Table B3.

In the year to date position there has however been no additional expenditure in excess of the core allocation.

#### **7. Savings Schemes & Tracker (Tables C, C1, C2 & C3)**

HEIW does not have any formal savings schemes and therefore these tables have not been completed. However, saving opportunities are taken in-year, and HEIW accounts for these within our position.

There is one validation error on the MMR that is related to the savings schemes template, although this appears to be because the tables are blank for HEIW.

## **8. Welsh NHS Assumptions (Table D)**

All NHS Wales organisations will be contacted in month 6 to agree updated income and expenditure assumptions for 2020-21.

## **9. Resource Limits (Table E)**

Table E includes all approved allocation changes for 2020/21 up to and including letter 4.

## **10. SoFP (Table F)**

This table does not need to be completed until month 6.

## **11. Cash Flow (Table G)**

This table does not need to be completed until month 6.

## **12. PSPP (Table H)**

The PSPP table is completed on a quarterly basis.

## **13. Capital (Tables I & K)**

HEIW has a discretionary capital allocation of £105k and a further £46k has been approved for the procurement of pharmacy equipment. No capital expenditure has been incurred to date and plans are being formulated to commit the allocation for this year. Managers were contacted during July and August in order to determine the individual service requirement.

The risk rating for the purchase of pharmacy equipment has been set at medium at month 5. The purchasing of the pharmacy equipment was delayed in 2019/20 since no responses were received when the procurement was put out to tender. The requirements of the project will be reviewed in 2020/21, but at this point we are unable to confirm if any suppliers will be in a position to submit tenders. Work is ongoing and updates will be given when they are received.

No assets have been disposed during the year.

#### **14. Aged Debtors (Table M)**

HEIW does not have any NHS aged-debtors older than eleven weeks as at 31<sup>st</sup> August 2020.

#### **15. Other Issues**

The financial information reported in the monitoring return aligns to the financial detail shared with the Executive Team and it is the intention for this return to be included in the Board papers for the September Board meeting. A copy of the Executive Team Financial Report is attached for information, which contains the detail of performance against delegated budgets for Month 5.

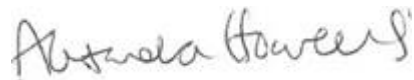
HEIW has not incurred any costs as a result of the Test, Trace and Protect strategy, and therefore the TTP template has not been completed.

#### **16. Authorisation**

The submission is signed by both the Director of Finance and Chief Executive.



**Eifion Williams**  
**Director of Finance**



**Alex Howells**  
**Chief Executive**

**Attachment: Extract from Month 5 Finance Report to Executive Management Team.**

#### **4. FINANCIAL POSITION**

HEIW is reporting an underspend of £1.483m against profiled budgets as at 31<sup>st</sup> August 2020. The underspend position in Pay budgets is due to vacancies across HEIW staffing establishments. The underspends in Non-Pay budgets are as a result of reduced training and education activity due to the COVID-19 lockdown restrictions. The significant underspend in Commissioning budgets are primarily as a result of under recruitment to Nurse education placements and the underspends in Medical budgets are related to under recruitment to medical training grade posts and Pharmacy.

The month 5 position was reported to WG on day 5 and further detail will be shared through the monitoring return submitted on day 9 in accordance with the required WHC reporting timetable.



**GIG**  
CYMRU  
**NHS**  
WALES

Addysg a Gwellu Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)



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**NHS**  
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Health Education and  
Improvement Wales (HEIW)

**As at 31st August 2020**

	Year to Date			Previous Month	
	Budget	Actual	Variance	Variance to Date	Movement
	£	£	£	£	£
<b>INCOME:</b>					
Welsh Government	(88,773,343)	(88,773,343)	0	0	0
Other Income	(235,687)	(195,382)	40,305	22,406	17,899
<b>Total Income</b>	<b>(89,009,030)</b>	<b>(88,968,725)</b>	<b>40,305</b>	<b>22,406</b>	<b>17,899</b>
<b>Expenditure</b>					
Board & Executive	680,783	637,890	(42,893)	(21,814)	(21,079)
Finance	385,648	376,209	(9,439)	(3,366)	(6,073)
Planning, Performance and Corporate Services	752,314	687,914	(64,400)	(25,888)	(38,512)
Digital and IT	1,954,344	1,913,778	(40,566)	(24,832)	(15,734)
Medical & Pharmacy	41,625,310	41,062,991	(562,319)	(527,409)	(34,910)
Nursing	42,825,978	42,078,431	(747,547)	(491,628)	(255,919)
Human Resources and Organisation Development	911,019	854,265	(56,754)	(53,742)	(3,012)
<b>Sub-Total Expenditure</b>	<b>89,135,396</b>	<b>87,611,477</b>	<b>(1,523,919)</b>	<b>(1,148,679)</b>	<b>(375,240)</b>
<b>Total</b>			<b>(1,483,615)</b>	<b>(1,126,273)</b>	<b>(357,342)</b>

The following table provides a further breakdown of the financial variance by Directorate.

Directorate	Income	Expenditure			Total
		Pay	Non Pay	Commissioning	
	£	£	£	£	£
Board and Executive		(13,073)	(29,820)		(42,893)
Chief Executive Reserve			0		0
Finance		(4,793)	(4,646)		(9,439)
Planning, Performance and Corporate Services		3,805	(68,205)		(64,400)
Digital and IT		(14,266)	(26,299)		(40,566)
Medical & Pharmacy	40,305	(189,763)	(282,603)	(89,953)	(522,015)
Nursing	0	(52,432)	(2,621)	(692,493)	(747,547)
Human Resources and Organisation Development		(12,169)	(44,585)		(56,754)
<b>Total</b>	<b>40,305</b>	<b>(282,692)</b>	<b>(458,781)</b>	<b>(782,446)</b>	<b>(1,483,615)</b>

The following analysis of the key underspends, by Directorate, is provided below: -

1. Board and Executives

- An underspend on pay is as a result of 2 wte vacancies, the Information Governance Officer has been appointed and is due to start in September, the advert for the PA role has just closed and appointment to the Interim Director of Nursing post at less than 1 wte also contributes to the underspend. The year to date underspend has again been reduced in month 5 by the re-purposing of £1m of budget phased across the year to support activities required to enable trainees to progress as a result of the Covid-19 pandemic.
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- The underspend on pay budgets of £3.4k is as a result of two vacancies within the team. The underspend associated with these vacancies would ordinarily have been offset by the costs of agency staff but as a result of the Covid-19 pandemic and lockdown the reliance on agency staff has reduced. The underspend has again been reduced in month 5 by the re-purposing of £1m of budget phased across the year to support activities to enable trainees to progress as a result of the Covid-19 pandemic and other new commitments.
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3. Planning, Performance and Corporate Services

- There is an adverse variance against the Pay budgets of £3.8K as a result of 1 wte vacant post that has been filled by an agency member of staff. Recruitment to the post is expected in January.
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- The underspend on pay of £189.8k is as a result of a number of administration and clerical vacancies across a range of teams which are only partly offset by agency costs. There are also vacancies in clinical lead roles including the SAS lead, lead for Simulation and Deputy Foundation lead.
- The underspend on non-pay of £282.6k is as a result of lower than anticipated spend on training expenses, lecture fees and travel and subsistence in the year to date. Also GP appraisals have been suspended in the first six months of the year creating a £194k underspend. Virtual sessions delivered through the Hamnet Street contract at a lower cost than face to face sessions also contribute to the underspend although the number of sessions is increasing and lower spend than budgeted on lay representatives offset by an increasing spend on supernumerary posts.



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  - The Commissioning budget is based on the existing student cohort in the system and the commissioned student numbers for 20/21. The underspend and hand back to WG reported in month 4 of £3.9m was as a result of the following factors:-

	Forecast Outturn	Notes
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Student Salaries	£0.5m	2
Self Funding Students	£1.6m	3
Delayed Course Starts	£0.7m	4
<b>Total</b>	<b>£3.9m</b>	

## Notes



GIG  
CYMRU  
NHS  
WALES

Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

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## 7. Human Resources and Organisation Development

- There are a high number of vacancies at 10.7 wte across the core budgets within the Directorate with only 1.7 wte offset by agency staff. The underspend on pay budgets has again been reduced in month 5 by the re-purposing of budget to support activities to enable trainees to progress as a result of the Covid-19 pandemic and other commitments
- A Non-Pay variance of £44.6K is predominantly due to underspends on training, consultancy, professional fees and conference budgets largely due to the impact of Covid-19 restrictions.

## VALIDATION SUMMARY 2020-21

Your organisation is showing as :	HEIW
Period is showing :	AUG 20
TABLE A : MOVEMENT	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE A1 : UNDERLYING POSITION	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE A2: RISKS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE B : MONTHLY POSITIONS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE B2 : PAY & AGENCY/LOCUM	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE B3 : COVID-19	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE C, C1 & C2 : SAVINGS SCHEMES	HEIW IS CURRENTLY SHOWING 1 ERRORS FOR THIS TABLE
TABLE C3 : TRACKER	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE E : RESOURCE LIMITS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE E1 : INVOICED INCOME	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE F : STATEMENT OF FINANCIAL POSITION	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE G : MONTHLY CASHFLOW	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE I : CAPITAL RESOURCE / EXPENDITURE LIMIT	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE J: CAPITAL IN YEAR SCHEMES	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
TABLE K : CAPITAL DISPOSALS	HEIW IS CURRENTLY SHOWING 0 ERRORS FOR THIS TABLE
<b>TOTAL ERRORS FOR YOUR AUG 20 RETURN IS</b>	<b>1 ERRORS ON 1 DIFFERENT TABLE/S</b>

Summary Of Main Financial Performance

Revenue Performance

		Actual YTD £'000	Annual Forecast £'000
1	Under / (Over) Performance	1,484	0

HEIW

Period : Aug 20

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

Line 12 should reflect the corresponding amounts included within the latest IMTP/AOP submission to WG

Lines 1 - 12 should not be adjusted after Month 1

	In Year Effect	Non Recurring	Recurring	FYE of Recurring
	£'000	£'000	£'000	£'000
1 Underlying Position b/fwd from Previous Year - as per 3 year plan (Surplus - Positive Value / Deficit - Negative Value)	0	0	0	0
2 New Cost Pressures - as per 3 year plan (Negative Value)	-28,752	0	-28,752	-33,676
3 Opening Cost Pressures	-28,752	0	-28,752	-33,676
4 Welsh Government Funding (Positive Value)	28,752	0	28,752	33,676
5 Identified Savings Plan (Positive Value)	0	0	0	0
6 Planned Net Income Generated (Positive Value)	0	0	0	0
7 Planned Accountancy Gains (Positive Value)	0	0	0	0
8 Planned Profit / (Loss) on Disposal of Assets	0	0	0	0
9 Planned Release of Uncommitted Contingencies & Reserves (Positive Value)	0	0	0	0
10	0	0	0	0
11 Planning Assumptions still to be finalised at Month 1	0	0	0	0
12 IMTP / Annual Operating Plan	0	0	0	0
13 Reversal of Planning Assumptions still to be finalised at Month 1	0	0	0	0
14 Month 1 Planned Savings - Forecast Underachievement Due to Covid-19	0	0	0	0
15 Month 1 Planned Savings - Other Forecast (Underachievement) / Overachievement	0	0	0	0
16 Additional In Year Identified Savings - Forecast (Positive Value)	0	0	0	0
17 Additional In Year & Variance from Planned Net Income Generated (Positive Value)	0	0	0	0
18 Additional In Year & Variance from Planned Accountancy Gains (Positive Value)	0	0	0	0
19 Additional In Year & Variance from Planned Profit / (Loss) on Disposal of Assets	0	0	0	0
20 Release of Previously Committed Contingencies & Reserves (Positive Value)	0	0	0	0
21 Additional In Year Welsh Government Funding (Positive Value)	0	0	0	0
22 Additional In Year Welsh Government Funding Due To Covid-19 (Positive Value)	0	0	0	0
23 Operational Expenditure Cost Increase Due To Covid-19 (Negative Value)	0	0	0	0
24 Planned Operational Expenditure Cost Reduction Due To Covid-19 (Positive Value)	719	719	0	0
25 (Positive Value)	0	0	0	0
26 Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	0	0	0	0
27 Return of funding as a result of delayed start dates (See Table B3)	-719	-719	0	0
28	0	0	0	0
29	0	0	0	0
30	0	0	0	0
31	0	0	0	0
32	0	0	0	0
33	0	0	0	0
34	0	0	0	0
35	0	0	0	0
36	0	0	0	0
37	0	0	0	0
38	0	0	0	0
39	0	0	0	0
40 Forecast Outturn (- Deficit / + Surplus)	0	0	0	0

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	In Year Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1													0	0
2	-1,739	-1,739	-1,739	-1,739	-2,151	-2,806	-2,806	-2,806	-2,806	-2,806	-2,806	-2,806	-9,108	-28,752
3	-1,739	-1,739	-1,739	-1,739	-2,151	-2,806	-2,806	-2,806	-2,806	-2,806	-2,806	-2,806	-9,108	-28,752
4	1,739	1,739	1,739	1,739	2,151	2,806	2,806	2,806	2,806	2,806	2,806	2,806	9,108	28,752
5	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8													0	0
9													0	0
10													0	0
11													0	0
12	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19													0	0
20													0	0
21													0	0
22													0	0
23	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24	0	0	0	0	0	0	0	0	0	0	0	719	0	719
25	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	329	363	289	145	358	44	-172	-222	-71	-163	-279	-621	1,484	0
27												-719	0	-719
28													0	0
29													0	0
30													0	0
31													0	0
32													0	0
33													0	0
34													0	0
35													0	0
36													0	0
37													0	0
38													0	0
39													0	0
40	329	363	289	145	358	44	-172	-222	-71	-163	-279	-621	1,484	0

Table A1 - Underlying Position

This table needs completing monthly from Month: 6

This Table is currently showing 0 errors

Section A - By Spend Area		IMTP	Full Year Effect of Actions			New, Recurring, Full Year Effect of Unmitigated Pressures (-ve)	IMTP
		Underlying Position b/f	Recurring Savings (+ve)	Recurring Allocations / Income (+ve)	Subtotal		Underlying Position c/f
		£'000	£'000	£'000	£'000	£'000	£'000
1	Pay - Administrative, Clerical & Board Members				0		0
2	Pay - Medical & Dental				0		0
3	Pay - Nursing & Midwifery Registered				0		0
4	Pay - Prof Scientific & Technical				0		0
5	Pay - Additional Clinical Services				0		0
6	Pay - Allied Health Professionals				0		0
7	Pay - Healthcare Scientists				0		0
8	Pay - Estates & Ancillary				0		0
9	Pay - Students				0		0
10	Non Pay - Supplies and services - clinical				0		0
11	Non Pay - Supplies and services - general				0		0
12	Non Pay - Consultancy Services				0		0
13	Non Pay - Establishment				0		0
14	Non Pay - Transport				0		0
15	Non Pay - Premises				0		0
16	Non Pay - External Contractors				0		0
17	Health Care Provided by other Orgs – Welsh LHBs				0		0
18	Health Care Provided by other Orgs – Welsh Trusts				0		0
19	Health Care Provided by other Orgs – WHSSC				0		0
20	Health Care Provided by other Orgs – English				0		0
21	Health Care Provided by other Orgs – Private / Other				0		0
22	<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Section B - By Directorate		IMTP	Full Year Effect of Actions			New, Recurring, Full Year Effect of Unmitigated Pressures (-ve)	IMTP
		Underlying Position b/f	Recurring Savings (+ve)	Recurring Allocations / Income (+ve)	Subtotal		Underlying Position c/f
		£'000	£'000	£'000	£'000	£'000	£'000
1	Primary Care				0		0
2	Mental Health				0		0
3	Continuing HealthCare				0		0
4	Commissioned Services				0		0
5	Scheduled Care				0		0
6	Unscheduled Care				0		0
7	Children & Women's				0		0
8	Community Services				0		0
9	Specialised Services				0		0
10	Executive / Corporate Areas				0		0
11	Support Services (inc. Estates & Facilities)				0		0
12	<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

This Table is currently showing 0 errors

Table A2 - Overview Of Key Risks & Opportunities		FORECAST YEAR END	
		£'000	Likelihood
	<b>Opportunities to achieve IMTP/AOP (positive values)</b>		
1	Red Pipeline schemes (inc AG & IG)		
2	Potential Cost Reduction		
3	<b>Total Opportunities to achieve IMTP/AOP</b>	0	
	<b>Risks (negative values)</b>		
4	Under delivery of Amber Schemes included in Outturn via Tracker		
5	Continuing Healthcare		
6	Prescribing		
7	Pharmacy Contract		
8	WHSSC Performance		
9	Other Contract Performance		
10	GMS Ring Fenced Allocation Underspend Potential Claw back		
11	Dental Ring Fenced Allocation Underspend Potential Claw back		
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26	<b>Total Risks</b>	0	
	<b>Further Opportunities (positive values)</b>		
27			
28			
29			
30			
31			
32			
33			
34	<b>Total Further Opportunities</b>	0	
35	<b>Current Reported Forecast Outturn</b>	0	
36	<b>IMTP / AOP Outturn Scenario</b>	0	
37	<b>Worst Case Outturn Scenario</b>	0	
38	<b>Best Case Outturn Scenario</b>	0	

**HEIW**

### Table B - Monthly Positions

YTD Months to be completed from Month:	1
Forecast Months to be completed from Month:	3

Period : Aug 20

**This Table is currently showing 0 errors**

A. Monthly Summarised Statement of Comprehensive Net Expenditure / Statement of Comprehensive Net Income			1	2	3	4	5	6	7	8	9	10	11	12	Total <u>YTD</u>	Forecast year-end position
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
1	Revenue Resource Limit	Actual/Fcast	17,662	18,470	18,566	15,390	18,812	21,500	20,200	21,000	23,000	22,300	20,350	25,372	88,900	242,622
2	Capital Donation / Government Grant Income	Actual/Fcast													0	0
3	Welsh NHS Local Health Boards & Trusts Income	Actual/Fcast													0	0
4	WHSSC Income	Actual/Fcast													0	0
5	Welsh Government Income (Non RRL)	Actual/Fcast													0	0
6	Other Income	Actual/Fcast	30	38	72	28	27	59	44	22	37	22	24	32	195	435
7	<b>Income Total</b>		<b>17,692</b>	<b>18,508</b>	<b>18,638</b>	<b>15,418</b>	<b>18,839</b>	<b>21,559</b>	<b>20,244</b>	<b>21,022</b>	<b>23,037</b>	<b>22,322</b>	<b>20,374</b>	<b>25,404</b>	<b>89,095</b>	<b>243,057</b>
8	Primary Care Contractor (excluding drugs, including non resource limited expenditure)	Actual/Fcast													0	0
9	Primary Care - Drugs & Appliances	Actual/Fcast													0	0
10	Provided Services - Pay	Actual/Fcast	1,268	1,260	1,267	1,265	1,278	1,336	1,346	1,340	1,441	1,449	1,446	1,589	6,338	16,285
11	Provider Services - Non Pay (excluding drugs & depreciation)	Actual/Fcast	1,149	1,121	1,189	(226)	703	1,354	1,010	1,132	1,653	1,509	1,286	3,930	3,936	15,810
12	Secondary Care - Drugs	Actual/Fcast													0	0
13	Healthcare Services Provided by Other NHS Bodies	Actual/Fcast													0	0
14	Non Healthcare Services Provided by Other NHS Bodies	Actual/Fcast													0	0
15	Continuing Care and Funded Nursing Care	Actual/Fcast													0	0
16	Other Private & Voluntary Sector	Actual/Fcast	14,904	15,722	15,851	14,192	16,458	18,783	18,018	18,730	19,972	19,484	17,878	20,463	77,127	210,455
17	Joint Financing and Other	Actual/Fcast													0	0
18	Losses, Special Payments and Irrecoverable Debts	Actual/Fcast													0	0
19	Exceptional (Income) / Costs - (Trust Only)	Actual/Fcast													0	0
20	Total Interest Receivable - (Trust Only)	Actual/Fcast													0	0
21	Total Interest Payable - (Trust Only)	Actual/Fcast													0	0
22	DEL Depreciation/Accelerated Depreciation/Impairments	Actual/Fcast	42	42	42	42	42	42	42	42	42	43	43	43	210	507
23	AME Donated Depreciation/Impairments	Actual/Fcast													0	0
24	Uncommitted Reserves & Contingencies	Actual/Fcast													0	0
25	Profit/Loss Disposal of Assets	Actual/Fcast													0	0
26	<b>Cost - Total</b>		<b>17,363</b>	<b>18,145</b>	<b>18,349</b>	<b>15,273</b>	<b>18,481</b>	<b>21,515</b>	<b>20,416</b>	<b>21,244</b>	<b>23,108</b>	<b>22,485</b>	<b>20,653</b>	<b>26,025</b>	<b>87,611</b>	<b>243,057</b>
27	<b>Net surplus/ (deficit)</b>	Actual/Fcast	<b>329</b>	<b>363</b>	<b>289</b>	<b>145</b>	<b>358</b>	<b>44</b>	<b>(172)</b>	<b>(222)</b>	<b>(71)</b>	<b>(163)</b>	<b>(279)</b>	<b>(621)</b>	<b>1,484</b>	<b>0</b>

### B. Assessment of Financial Forecast Positions

Year-to-date (YTD)	£'000	
28. Actual YTD surplus/ (deficit)	1,484	
29. Actual YTD surplus/ (deficit) last month	1,126	
30. Current month actual surplus/ (deficit)	358	Trend
31. Average monthly surplus/ (deficit) YTD	297	▲
32. YTD /remaining months	212	

Full-year surplus/ (deficit) scenarios	£'000
33. Extrapolated Scenario	3,990
34. Year to Date Trend Scenario	3,562

### C. DEL/AME Depreciation & Impairments

[illegible]



**HEIW**

Period : Aug 20

YTD Months to be completed from Month: 1

1

**This Table is currently showing 0 errors**

Forecast Months to be completed from Month: 3

**3**

### Table B2 - Pay Expenditure Analysis

### A - Pay Expenditure

A - Pay Expenditure		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
REF	TYPE	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Administrative, Clerical & Board Members	763	756	765	737	756	798	803	799	860	865	863	957	3,777	9,722
2	Medical & Dental	419	420	415	413	420	440	444	442	475	477	477	524	2,087	5,366
3	Nursing & Midwifery Registered	6	5	6	32	13	13	13	13	14	14	14	14	62	157
4	Prof Scientific & Technical	68	68	70	72	78	73	74	74	79	80	79	80	356	895
5	Additional Clinical Services	12	11	11	11	11	12	12	12	13	13	13	14	56	145
6	Allied Health Professionals													0	0
7	Healthcare Scientists													0	0
8	Estates & Ancillary													0	0
9	Students													0	0
10	TOTAL PAY EXPENDITURE	1,268	1,260	1,267	1,265	1,278	1,336	1,346	1,340	1,441	1,449	1,446	1,589	6,338	16,285

### Analysis of Pay Expenditure

[illegible]

**B - Agency / Locum (premium) Expenditure**

- Analysed by Type of Staff

B - Agency / Locum (premium) Expenditure		1	2	3	4	5	6	7	8	9	10	11	12		
- Analysed by Type of Staff		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
REF	TYPE	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Administrative, Clerical & Board Members	27	17	19	13	16	25	25	30	30	35	35	39	92	311
2	Medical & Dental													0	0
3	Nursing & Midwifery Registered													0	0
4	Prof Scientific & Technical													0	0
5	Additional Clinical Services													0	0
6	Allied Health Professionals													0	0
7	Healthcare Scientists													0	0
8	Estates & Ancillary													0	0
9	Students													0	0
10	TOTAL AGENCY/LOCUM (PREMIUM) EXPENDITURE	27	17	19	13	16	25	25	30	30	35	35	39	92	311

[illegible]**C - Agency / Locum (premium) Expenditure**

- Analysed by Reason for Using Agency/Locum (premium)

[illegible]

This Table is currently showing 0 errors

**Table B3 - COVID-19 Analysis**

**A - Additional Expenditure**

A - Additional Expenditure		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
REF	Enter as positive values	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Pay (Additional costs due to C19)														
2	Establishment & Bank Additional Hours:														
3	Administrative, Clerical & Board Members													0	0
4	Medical & Dental													0	0
5	Nursing & Midwifery Registered													0	0
6	Prof Scientific & Technical													0	0
7	Additional Clinical Services													0	0
8	Allied Health Professionals													0	0
9	Healthcare Scientists													0	0
10	Estates & Ancillary													0	0
11	Sub total Establishment & Bank Additional Hours	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12	Agency:														
13	Administrative, Clerical & Board Members													0	0
14	Medical & Dental													0	0
15	Nursing & Midwifery Registered													0	0
16	Prof Scientific & Technical													0	0
17	Additional Clinical Services													0	0
18	Allied Health Professionals													0	0
19	Healthcare Scientists													0	0
20	Estates & Ancillary													0	0
21	Sub total Agency	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Returners (Provide WTE to the right):														
23	Administrative, Clerical & Board Members													0	0
24	Medical & Dental													0	0
25	Nursing & Midwifery Registered													0	0
26	Prof Scientific & Technical													0	0
27	Additional Clinical Services													0	0
28	Allied Health Professionals													0	0
29	Healthcare Scientists													0	0
30	Estates & Ancillary													0	0
31	Sub total Returners	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Students (Provide WTE to the right):														
33	Medical & Dental													0	0
34	Nursing & Midwifery Registered													0	0
35	Prof Scientific & Technical													0	0
36	Additional Clinical Services													0	0
37	Allied Health Professionals													0	0
38	Healthcare Scientists													0	0
39	Estates & Ancillary													0	0
40	Sub total Students	0	0	0	0	0	0	0	0	0	0	0	0	0	0
41	Other Temp Staff (Provide WTE to the right):														
42	Administrative, Clerical & Board Members													0	0
43	Medical & Dental													0	0
44	Nursing & Midwifery Registered													0	0
45	Prof Scientific & Technical													0	0
46	Additional Clinical Services													0	0
47	Allied Health Professionals													0	0
48	Healthcare Scientists													0	0
49	Estates & Ancillary													0	0
50	Sub total Other Temp Staff	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Other (specify below and in narrative)														
52														0	0
53														0	0
54														0	0
55														0	0
56	TOTAL ADDITIONAL PAY EXPENDITURE	0	0	0	0	0	0	0	0	0	0	0	0	0	0



[illegible]

B - Non Delivery of Planned Savings Due To C19						1	2	3	4	5	6	7	8	9	10	11	12		
						Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
<i>Enter as Positive values</i>						£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
111	<b>Non Delivery of Planned Savings (due to C19)</b>																		
112	Non delivery of Finalised (M1) Savings																	0	0
113	Non delivery of Savings Assumed but not finalised at M1																	0	0
114	<b>TOTAL NON DELIVERY OF PLANNED SAVINGS</b>																	0	0

[illegible][illegible]

		1	2	3	4	5	6	7	8	9	10	11	12	Forecast year-end position	
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
	Enter as Negative values														
126	Slippage on Planned Investments/Repurposing of Developmental Initiatives (due to C19)														
127															
128															
129															
130															
131															
132															
133															
134															
135	TOTAL RELEASE/REPURPOSING OF PLANNED INVESTMENTS/DEVELOPMENT INITIATIVES (Agrees to Table A)														
136		0	0	0	0	0	0	0	0	0	0	0	0	0	0
137	NET EXPENDITURE DUE TO Covid-19	0	0	0	0	0	0	0	0	0	0	0	(719)	0	(719)

D - Slippage on Planned Investments/Repurposing of Developmental Initiatives due to C19		1	2	3	4	5	6	7	8	9	10	11	12	Forecast	
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	year-end position
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
	Enter as Negative values														
126	Slippage on Planned Investments/Repurposing of Developmental Initiatives (due to C19)													0	0
127														0	0
128														0	0
129														0	0
130														0	0
131														0	0
132														0	0
133														0	0
134														0	0
135														0	0
136	TOTAL RELEASE/REPURPOSING OF PLANNED INVESTMENTS/DEVELOPMENT INITIATIVES (Agrees to Table A)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
137	NET EXPENDITURE DUE TO Covid-19	0	0	0	0	0	0	0	0	0	0	0	(719)	0	(719)

**A - WTE of New Staff**

[illegible]

**A1 - Major Projects : Change in Bed Numbers Due To C19 (subset of Table A)**

[illegible]

Period : Aug 20

**Table C - Identified Expenditure Savings Schemes (Excludes Income Generation & Accountancy Gains)**

**This Table is currently showing 1 errors**

Some errors will be resolved when complete rows have data or associated tables are completed

[illegible]

Table C1- Savings Schemes Pay Analysis

		Month	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			YTD variance as %age of YTD Budget/Plan	Green £'000	Amber £'000	non recurring £'000	recurring £'000	
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000								
1	Changes in Staffing Establishment	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
2		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
3		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
4	Variable Pay	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
6		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
7	Locum	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
10	Agency / Locum paid at a premium	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
11		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
12		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
13	Changes in Bank Staff	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
14		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
15		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
16	Other (Please Specify)	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
17		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
19	Total	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
20		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
21		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			

Table C2- Savings Schemes Agency/Locum Paid at a Premium Analysis

	Month	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			YTD variance as %age of YTD Budget/Plan	Green	Amber	non recurring	recurring	
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000			£'000	£'000	£'000	£'000	£'000	
1	Reduced usage of Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
2	Agency/Locums paid at a Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
3	premium Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
4	Non Medical 'off contract' Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5	to 'on contract' Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
6	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
7	Medical - Impact of Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8	Agency pay rate caps Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
9	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
10	Other (Please Specify) Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
11	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
12	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
13	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
14	Total Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
15	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			

**This Table is currently showing 0 errors**

Table C3 - Tracker

[illegible]

## HEIW

Period : Aug 20

**Table D - Income/Expenditure Assumptions**

### Annual Forecast

	<b>LHB/Trust</b>	<b>Contracted Income £'000</b>	<b>Non Contracted Income £'000</b>	<b>Total Income £'000</b>
1	Swansea Bay University		4	4
2	Aneurin Bevan University		4	4
3	Betsi Cadwaladr University		4	4
4	Cardiff & Vale University		7	7
5	Cwm Taf Morgannwg University		4	4
6	Hywel Dda University		3	3
7	Powys			0
8	Public Health Wales		9	9
9	Velindre		20	20
10	NWSSP			0
11	NWIS			0
12	Wales Ambulance Services			0
13	WHSSC			0
14	EASC			0
15	HEIW			0
16	NHS Wales Executive			0
17	<b>Total</b>	<b>0</b>	<b>55</b>	<b>55</b>

<b>Contracted Expenditure £'000</b>	<b>Non Contracted Expenditure £'000</b>	<b>Total Expenditure £'000</b>
	12,859	12,859
	10,050	10,050
	15,272	15,272
	20,552	20,552
	12,085	12,085
	7,530	7,530
	550	550
	1,222	1,222
	31,471	31,471
		0
		0
	490	490
		0
		0
		0
		0
<b>0</b>	<b>112,081</b>	<b>112,081</b>

Table E - Resource Limits

1. BASE ALLOCATION

	STATUS OF ISSUED RESOURCE LIMIT ITEMS				Total Revenue Resource Limit £'000	Recurring (R) or Non Recurring (NR)	Total Revenue Drawing Limit £'000	Total Capital Resource Limit £'000	Total Capital Drawing Limit £'000	WG Contact and Date Item First Entered Into Table
	HCHS £'000	Pharmacy £'000	Dental £'000	GMS £'000						
1 LATEST ALLOCATION LETTER/SCHEDULE REF:	4									
2 Total Confirmed Funding	241,049				241,049		240,529	151	151	

2. ANTICIPATED ALLOCATIONS

3 DEL Non Cash Depreciation - Baseline Surplus / Shortfall					0					
4 DEL Non Cash Depreciation - Strategic					0					
5 DEL Non Cash Depreciation - Accelerated					0					
6 DEL Non Cash Depreciation - Impairment					0					
7 AME Non Cash Depreciation - Donated Assets					0					
8 AME Non Cash Depreciation - Impairment					0					
9 AME Non Cash Depreciation - Impairment Reversals					0					
10 Removal of Donated Assets / Government Grant Receipts					0					
11 Nurse Staffing Act	180				180 NR		180			Month 1 - Richard Dudley
12 WCLF QIST (Pharmacy)	85				85 NR		85			Month 1 - Richard Dudley
13 Commitment Awards	50				50 NR		50			Month 1 - Richard Dudley
14 Development Funding	600				600 NR		600			Month 1 - Richard Dudley
15 Strategic Review of Education Provision	240				240 NR		240			Month 1 - Richard Dudley
16 Leadership & Succession Posts	77				77 R		77			Month 1 - Richard Dudley
17 SAS Post	111				111 R		111			Month 1 - Richard Dudley
18 Single Lead Employer Foundation	260				260 R		260			Month 1 - Richard Dudley
19 Senior Software Developer	56				56 R		56			Month 1 - Richard Dudley
20 WCLTF Optometry - 50% Funding	34				34 NR		34			Month 4
21 Return of funding re NMET	(120)				(120) NR		(120)			Month 4 - Steve Elliott
22					0					
23					0					
24					0					
25					0					
26					0					
27					0					
28					0					
29					0					
30					0					
31					0					
32					0					
33					0					
34					0					
35					0					
36					0					
37					0					
38					0					
39					0					
40					0					
41					0					
42					0					
43					0					
44					0					
45					0					
46					0					
47					0					
48					0					
49					0					
50					0					
51					0					
52					0					
53					0					
54					0					
55					0					
56 Total Anticipated Funding	1,573	0	0	0	1,573		1,573	0	0	

3. TOTAL RESOURCES & BUDGET RECONCILIATION

57 Confirmed Resources Per 1. above	241,049	0	0	0	241,049		240,529	151	151	
58 Anticipated Resources Per 2. above	1,573	0	0	0	1,573		1,573	0	0	
59 Total Resources	242,622	0	0	0	242,622		242,102	151	151	

**HEIW**

Period : Aug 20

**This Table is currently showing 0 errors**

**Table E1 - Invoiced Income Streams - TRUSTS ONLY**[illegible]

HEIW

Period : Aug 20

This table needs completing monthly from Month: 6  
This Table is currently showing 0 errors

Table F - Statement of Financial Position For Monthly Period

	Opening Balance Beginning of Apr 20	Closing Balance End of Aug 20	Forecast Closing Balance End of Mar 21
<b>Non-Current Assets</b>	£'000	£'000	£'000
1 Property, plant and equipment			
2 Intangible assets			
3 Trade and other receivables			
4 Other financial assets			
5 Non-Current Assets sub total	0	0	0
<b>Current Assets</b>			
6 Inventories			
7 Trade and other receivables			
8 Other financial assets			
9 Cash and cash equivalents			
10 Non-current assets classified as held for sale			
11 Current Assets sub total	0	0	0
12 <b>TOTAL ASSETS</b>	0	0	0
<b>Current Liabilities</b>			
13 Trade and other payables			
14 Borrowings (Trust Only)			
15 Other financial liabilities			
16 Provisions			
17 Current Liabilities sub total	0	0	0
18 <b>NET ASSETS LESS CURRENT LIABILITIES</b>	0	0	0
<b>Non-Current Liabilities</b>			
19 Trade and other payables			
20 Borrowings (Trust Only)			
21 Other financial liabilities			
22 Provisions			
23 Non-Current Liabilities sub total	0	0	0
24 <b>TOTAL ASSETS EMPLOYED</b>	0	0	0
<b>FINANCED BY: Taxpayers' Equity</b>			
25 General Fund			
26 Revaluation Reserve			
27 PDC (Trust only)			
28 Retained earnings (Trust Only)			
29 Other reserve			
30 <b>Total Taxpayers' Equity</b>	0	0	0

EXPLANATION OF ALL PROVISIONS	Opening Balance Beginning of Apr 20	Closing Balance End of Aug 20	Closing Balance End of Mar 21
31			
32			
33			
34			
35			
36			
37			
38			
39			
40 <b>Total Provisions</b>	0	0	0

## ANALYSIS OF WELSH NHS RECEIVABLES (current month)

41 Welsh NHS Receivables Aged 0 - 10 weeks
42 Welsh NHS Receivables Aged 11 - 16 weeks
43 Welsh NHS Receivables Aged 17 weeks and over

£'000
0
0
0

## ANALYSIS OF TRADE &amp; OTHER PAYABLES (opening, current &amp; closing)

	£'000	£'000	£'000
44 Capital	0	0	0
45 Revenue	0	0	0

## ANALYSIS OF CASH (opening, current &amp; closing)

	£'000	£'000	£'000
46 Capital	0	0	0
47 Revenue	0	0	0

**This Table is currently showing 0 errors**

**This table needs completing monthly from Month: 6**

### Table G - Monthly Cashflow Forecast

[illegible]

**HEIW**

Period : Aug 20

Table H - PSPP

**This table needs completing on a quarterly basis**  
**NOTE: Data to 1 decimal place**

### 30 DAY COMPLIANCE

30 DAY COMPLIANCE			ACTUAL Q1		ACTUAL Q2		ACTUAL Q3		ACTUAL Q4		YEAR TO DATE		FORECAST YEAR END	
		Target %	Actual %	Variance %	Actual %	Variance %	Actual %	Variance %	Actual %	Variance %	Actual %	Variance %	Forecast %	Variance %
PROMPT PAYMENT OF INVOICE PERFORMANCE														
1	% of NHS Invoices Paid Within 30 Days - By Value	95.0%		-95.0%		-95.0%		-95.0%		-95.0%		-95.0%		-95.0%
2	% of NHS Invoices Paid Within 30 Days - By Number	95.0%		-95.0%		-95.0%		-95.0%		-95.0%		-95.0%		-95.0%
3	% of Non NHS Invoices Paid Within 30 Days - By Value	95.0%		-95.0%		-95.0%		-95.0%		-95.0%		-95.0%		-95.0%
4	% of Non NHS Invoices Paid Within 30 Days - By Number	95.0%		-95.0%		-95.0%		-95.0%		-95.0%		-95.0%		-95.0%

## 10 DAY COMPLIANCE

[illegible]

This Table is currently showing 0 errors

Table I - 2020-21 Capital Resource / Expenditure Limit Management

£'000 151  
Approved CRL / CEL issued at : 9/4/20

Ref:	Performance against CRL / CEL	Year To Date			Forecast		
		Plan £'000	Actual £'000	Variance £'000	Plan £'000	F'cast £'000	Variance £'000
	<i>Gross expenditure (accrued, to include capitalised finance leases)</i>						
	All Wales Capital Programme:						
	Schemes:						
1	Pharmacy Equipment			0	46	46	0
2				0			0
3				0			0
4				0			0
5				0			0
6				0			0
7				0			0
8				0			0
9				0			0
10				0			0
11				0			0
12				0			0
13				0			0
14				0			0
15				0			0
16				0			0
17				0			0
18				0			0
19				0			0
20				0			0
21				0			0
22				0			0
23				0			0
24				0			0
25				0			0
26				0			0
27				0			0
28				0			0
29				0			0
30				0			0
31				0			0
32				0			0
33				0			0
34				0			0
35				0			0
36				0			0
37				0			0
38				0			0
39				0			0
40				0			0
41				0			0
42	Sub Total	0	0	0	46	46	0
	Discretionary:						
43	I.T.			0			0
44	Equipment			0			0
45	Statutory Compliance			0			0
46	Estates			0			0
47	Other			0	105	105	0
48	Sub Total	0	0	0	105	105	0

	Other Schemes:							
49				0				0
50				0				0
51				0				0
52				0				0
53				0				0
54				0				0
55				0				0
56				0				0
57				0				0
58				0				0
59				0				0
60				0				0
61				0				0
62				0				0
63				0				0
64				0				0
65				0				0
66				0				0
67				0				0
68				0				0
69	Sub Total	0	0	0		0	0	0
70	Total Expenditure	0	0	0		151	151	0
	Less:							
	Capital grants:							
71				0				0
72				0				0
73				0				0
74				0				0
75				0				0
76	Sub Total	0	0	0		0	0	0
	Donations:							
77				0				0
78	Sub Total	0	0	0		0	0	0
	Asset Disposals:							
79				0				0
80				0				0
81				0				0
82				0				0
83				0				0
84				0				0
85				0				0
86				0				0
87				0				0
88				0				0
89				0				0
90	Sub Total	0	0	0		0	0	0
91	Technical Adjustments			0				0
92	CHARGE AGAINST CRL / CEL	0	0	0		151	151	0
93	PERFORMANCE AGAINST CRL / CEL (Under)/Over		(151)				0	

YTD Months to be completed from Month: 4  
Forecast Months to be completed from Month: 6

Table J - In Year Capital Scheme Profiles

This Table is currently showing 0 error:

Ref:	All Wales Capital Programme: Schemes:	Project Manager	In Year Min. £'000	Forecast Max. £'000	Capital Expenditure Monthly Profile												YTD £'000	Total £'000	Risk Level
					April £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000			
1	Pharmacy Equipment	Margaret Allen	0	46									46				0	46	Medium
2																	0	0	
3																	0	0	
4																	0	0	
5																	0	0	
6																	0	0	
7																	0	0	
8																	0	0	
9																	0	0	
10																	0	0	
11																	0	0	
12																	0	0	
13																	0	0	
14																	0	0	
15																	0	0	
16																	0	0	
17																	0	0	
18																	0	0	
19																	0	0	
20																	0	0	
21																	0	0	
22																	0	0	
23																	0	0	
24																	0	0	
25																	0	0	
26																	0	0	
27																	0	0	
28																	0	0	
29																	0	0	
30																	0	0	
31																	0	0	
32																	0	0	
33																	0	0	
34	Sub Total		0	46	0	0	0	0	0	0	0	0	46	0	0	0	0	46	
Discretionary:																			
35	I.T.																0	0	
36	Equipment																0	0	
37	Statutory Compliance																0	0	
38	Estates																0	0	
39	Other		0	105									50		55		0	105	Low
40	Sub Total		0	105	0	0	0	0	0	0	0	0	50	0	55	0	0	105	
Other Schemes:																			
41																	0	0	
42																	0	0	
43																	0	0	
44																	0	0	
45																	0	0	
46																	0	0	
47																	0	0	
48																	0	0	
49																	0	0	
50																	0	0	
51																	0	0	
52																	0	0	
53																	0	0	
54																	0	0	
55																	0	0	
56																	0	0	
57																	0	0	
58																	0	0	
59																	0	0	
60																	0	0	
61	Sub Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
62	Total Capital Expenditure		0	151	0	0	0	0	0	0	0	0	96	0	55	0	0	151	

Table K - Capital Disposals

This Table is currently showing 0 errors

A: In Year Disposal of Assets

	Description	Date of Ministerial Approval to Dispose (Land & Buildings only)	Date of Ministerial Approval to Retain Proceeds > £0.5m	Date of Disposal	NBV £'000	Sales Receipts £'000	Cost of Disposals £'000	Gain/ (Loss) £'000	Comments
		MM/YY (text format, e.g. Apr 20)	MM/YY (text format, e.g. Apr 20)	MM/YY (text format, e.g. Feb 21)					
1								0	
2								0	
3								0	
4								0	
5								0	
6								0	
7								0	
8								0	
9								0	
10								0	
11								0	
12								0	
13								0	
14								0	
15								0	
16								0	
17								0	
18								0	
19								0	
	Total for in-year				0	0	0	0	

This Table is currently showing 0 errors

This table needs completing monthly from Month: 6

Table L: EXTERNAL FINANCING LIMIT

		Full Year Per WG £'000	Full Year Per Trust £'000	Planning Variance £'000	Actual to date £'000
REF	<b>NET FINANCIAL CHANGE</b>	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
1	Retained surplus/(deficit) for period			0	
2	Depreciation			0	
3	Depreciation on Donated Assets			0	
4	DEL and AME Impairments			0	
5	Net gain/loss on disposal of assets			0	
6	Profit/loss on sale term of disc ops			0	
7	Proceeds of Capital Disposals			0	
8	Other Income (specify)			0	
9	<b>APPLICATION OF FUNDS</b>				
10	Capital Expenditure			0	
11	Other Expenditure			0	
	<b>MOVEMENTS IN WORKING CAPITAL</b>				
12	Inventories			0	
13	Current assets - Trade and other receivables			0	
14	Current liabilities - Trade and other payables			0	
15	Non current liabilities - Trade and other payables			0	
16	Provisions			0	
17	Sub total - movement in working capital	0	0	0	0
18	<b>NET FINANCIAL CHANGE</b>	0	0	0	0
	<b>EFL REQUIREMENT TO BE MET BY</b>				
19	Increase in Public Dividend Capital			0	
20	Net change in temporary borrowing			0	
21	Change in bank deposits and interest bearing securities			0	
22	Net change in finance lease payables			0	
23	<b>TOTAL EXTERNAL FINANCE</b>	0	0	0	0

Invoices paid since the end of the month:		
Total outstanding as per MR submission date:	0.00	0.00

Total outstanding as per MR submission date	0.00	0.00
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HEIW

Period : Aug 20

Table N - General Medical Services  
Table to be completed from Q2

This Table is currently showing 0 errors

Operating Expenditure - ring fenced GMS budget

SUMMARY OF GENERAL MEDICAL SERVICES FINANCIAL POSITION		WG Allocation	Current Plan	Forecast Outturn	Variance	Year to Date
	LINE NO.	£000's	£000's	£000's	£000's	£000's
Global Sum	1					
MPIG Correction Factor	2					
<b>Total Global Sum and MPIG</b>	3				0	0
Quality Aspiration Payments	4					
Quality Achievement Payments	5					
Quality Assurance Improvement Framework (QAIF)	6					
QAIF (In hours Access)	7					
<b>Total Quality</b>	8				0	0
Direct Enhanced Services (To equal data in Section A (i) Line 32)	9				0	
National Enhanced Services (To equal data in Section A (ii) Line 42)	10				0	
Local Enhanced Services (To equal data in Section A (iii) Line 95)	11				0	
<b>Total Enhanced Services (To equal data in section A Line 96)</b>	12		0	0	0	0
LHB Administered (To equal data in Section B Line 109)	13				0	
Premises (To equal data in section C Line 138)	14				0	
IM & T	15				0	
Out of Hours (including OOHDF)	16				0	
Dispensing (To equal data in Line 154)	17				0	
<b>Total</b>	18	0	0	0	0	0

SUPPLEMENTARY INFORMATION						
Directed Enhanced Services	Section A (i)	LINE NO.	£000's	£000's	£000's	£000's
Learning Disabilities		19				0
Childhood Immunisation Scheme		20				0
Mental Health		21				0
Influenza & Pneumococcal Immunisations Scheme		22				0
Services for Violent Patients		23				0
Minor Surgery Fees		24				0
<b>MENU of Agreed DES</b>						
Asylum Seekers & Refugees		25				0
Care of Diabetes		26				0
Care Homes		27				0
Extended Surgery Opening		28				0
Gender Identity		29				0
Homeless		30				0
Oral Anticoagulation with Warfarin		31				0
<b>TOTAL Directed Enhanced Services (must equal line 9)</b>		32		0	0	0

National Enhanced Services	A (ii)	LINE NO.	£000's	£000's	£000's	£000's
INR Monitoring		33				0
Shared care drug monitoring (Near Patient Testing)		34				0
Drug Misuse		35				0
IUCD		36				0
Alcohol misuse		37				0
Depression		38				0
Minor injury services		39				0
Diabetes		40				0
Services to the homeless		41				0
<b>TOTAL National Enhanced Services (must equal line 10)</b>		42		0	0	0

Local Enhanced Services	A (iii)	LINE NO.	£000's	£000's	£000's	£000's	£000's
ADHD		43					0
Asylum Seekers & Refugees		44					0
Cardiology		45					0
Care Homes		46					0
Care of Diabetes		47					0
Chiropody		48					0
Counselling		49					0
Depo - Provera (including Implanon & Nexplanon)		50					0
Dermatology		51					0
Dietetics		52					0
DOAC/NOAC		53					0
Drugs Misuse		54					0
Extended Minor Surgery		55					0
Gonaderlins		56					0
Homeless		57					0
HPV Vaccinations		58					0
Immunisations (inc Pertussis excluding DES - Childhood Imm & Influenza & Pneumococcal Imm		59					0
Learning Disabilities		60					0
Lithium / INR Monitoring		61					0
Local Development Schemes		62					0
Mental Health		63					0
Minor Injuries		64					0
MMR		65					0
Multiple Sclerosis		66					0
Muscular Skeletal		67					0
Nursing Homes		68					0
Orthopaedic (Upper Limb GPwSi/Clinical Assessments)		69					0
Osteopathy		70					0
Phlebotomy		71					0
Physiotherapy (inc MT3)		72					0
Referral Management		73					0
Respiratory (inc COPD)		74					0
Ring Pessaries		75					0
Sexual Health Services		76					0
Shared Care		77					0
Smoking Cessation		78					0
Substance Misuse		79					0
Suturing		80					0
Swine Flu		81					0
Transport/Ambulance costs		82					0
Vasectomy		83					0
Weight Loss Clinic (inc Exercise Referral)		84					0
Wound Care		85					0
Zoladex		86					0
		87					0
		88					0
		89					0
		90					0
		91					0
		92					0
		93					0
		94					0
TOTAL Local Enhanced Services (must equal line 11)		95		0	0	0	0
TOTAL Enhanced Services (must equal line 12)		96		0	0	0	0

**GENERAL MEDICAL SERVICES**  
**Operating Expenditure**

LHB Administered	Section B	LINE NO.	WG £000's	Current Plan £000's	Forecast £000's	Variance £000's	Year to Date £000's
Seniority		97					
Doctors Retainer Scheme Payments		98					
Locum Allowances consists of adoptive, paternity & maternity		99					
Locum Allowances : Cover for Sick Leave		100					
Locum Allowances : Cover For Suspended Doctors		101					
Prolonged Study Leave		102					
Recruitment and Retention (including Golden Hello)		103					
Appraisal - Appraiser Costs		104					
Primary Care Development Scheme		105					
Partnership Premium		106					
Supply of syringes & needles		107					
Other (please provide detail below, this should reconcile to line 128)		108					
TOTAL LHB Administered (must equal line 13)		109				0	0

Analysis of Other Payments (line 108)	LINE NO.	£000's	£000's	£000's	£000's	£000's
Additional Managed Practice costs (costs in excess of Global Sum/MPIG)	110					
CRB checks	111					
GP Locum payments	112					
LHB Locality group costs	113					
Managing Practice costs (LHB employed staff working in GP practices to improve GP services)	114					
Primary Care Initiatives	115					
Salaried GP costs	116					
Stationery & Distribution	117					
Training	118					
Translation fees	119					
	120					
	121					
	122					
	123					
	124					
	125					
	126					
	127					
<b>TOTAL of Other Payments (must equal line 108)</b>	<b>128</b>					<b>0</b>

Premises	Section C	LINE NO.	£000's	£000's	£000's	£000's	£000's
Notional Rents		129					
Actual Rents: Health Centres		130					
Actual Rents: Others		131					
Cost Rent		132					
Clinical Waste/ Trade Refuse		133					
Rates, Water, sewerage etc		134					
Health Centre Charges		135					
Improvement Grants		136					
All other Premises (please detail below which should reconcile to line 146)		137					
<b>TOTAL Premises (must equal line 14)</b>		<b>138</b>				<b>0</b>	<b>0</b>

Analysis of Other Premises (Line 137)	LINE NO.	£000's	£000's	£000's	£000's	£000's
	139					
	140					
	141					
	142					
	143					
	144					
	145					
<b>TOTAL of Other Premises (must equal line 137)</b>	<b>146</b>					<b>0</b>

Memorandum item						
Enhanced Services included above but in dispute with LMC (TOTAL)	147					
Enhanced Services included above but not yet formally agreed LMC	148					

**GENERAL MEDICAL SERVICES**  
Dispensing

Dispensing Data	LINE NO.	WG £000's	Current Plan £000's	Forecast £000's	Variance £000's	Year to Date £000's
<b>Cost of Drugs and Appliances, after discounts and plus container allowance (and plus VAT where applicable)</b>						
Dispensing Doctors	149					
Prescribing Medical Practitioners - Personal Administration	150					
Dispensing Service Quality Payment	151					
<b>Professional Fees and on-cost</b>						
Dispensing Doctors	152					
Prescribing Medical Practitioners - Personal Administration	153					
<b>TOTAL DISPENSING DATA (must equal line 17)</b>	<b>154</b>				<b>0</b>	<b>0</b>

HEIW

Period : Aug 20

Table O - General Dental Services

This Table is currently showing 0 errors

Table to be completed from Q2

Operating Expenditure from the revenue allocation for the dental contract

SUMMARY OF DENTAL SERVICES FINANCIAL POSITION		WG Allocation	Current Plan	Forecast Outturn	Variance	Year to Date
Expenditure / activities included in a GDS contract and / or PDS agreement	LINE NO.	£000's	£000's	£000's	£000's	£000's
Gross Contract Value - Personal Dental Services	1				0	
Gross Contract Value - General Dental Services	2				0	
Emergency Dental Services (inc Out of Hours)	3				0	
Additional Access	4				0	
Business Rates	5				0	
Domiciliary Services	6				0	
Maternity/Sickness etc.	7				0	
Sedation services including GA	8				0	
Seniority payments	9				0	
Employer's Superannuation	10				0	
Oral surgery	11				0	
OTHER (PLEASE DETAIL BELOW)	12				0	
<b>TOTAL DENTAL SERVICES EXPENDITURE</b>	<b>13</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>OTHER (PLEASE DETAIL BELOW) - Activities / expenditure <u>not</u> included in a GDS contract and / or PDS agreement. This includes payments made under other arrangements e.g. GA under an SLA and D2S, plus other or one off payments such as dental nurse training</b>	<b>LINE NO.</b>		£000's	£000's	£000's	£000's
Emergency Dental Services (inc Out of Hours)	14					
Additional Access	15					
Sedation services including GA	16					
Continuing professional development	17					
Occupational Health / Hepatitis B	18					
Gwen Am Byth - Oral Health in care homes	19					
Refund of patient charges	20					
Design to Smile	21					
Other Community Dental Services inc WHC/2015/001	22					
Dental Foundation Training/Vocational Training	23					
DBS/CRB checks	24					
Health Board staff costs associated with the delivery / monitoring of the dental contract	25					
Oral Surgery	26					
Orthodontics	27					
Special care dentistry e.g. WHC/2015/002	28					
Oral Health Promotion/Education	29					
	30					
	31					
	32					
	33					
	34					
	35					
	36					
	37					
	38					
	39					
	40					
	41					
	42					
<b>TOTAL OTHER (must equal line 12)</b>	<b>43</b>			<b>0</b>		<b>0</b>
RECEIPTS						
<b>TOTAL DENTAL SERVICES INCOME (Enter as a negative value)</b>	<b>44</b>				<b>0</b>	



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Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>24 September 2020</b>	<b>Agenda Item</b>	<b>4.2</b>
<b>Report Title</b>	<b>HEIW Integrated Performance Report September 2020-21</b>		
<b>Report Author</b>	Chris Payne, Assistant Director of Planning, Performance & Digital		
<b>Report Sponsor</b>	Julie Rogers, Deputy CEO/Director of Workforce & OD		
<b>Presented by</b>	Julie Rogers, Deputy CEO/Director of Workforce & OD		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	To provide the bi-monthly update on current HEIW performance of HEIW.		
<b>Key Issues</b>	<p>The integrated report at appendix 1 updates the Board on performance against Quarter 2 Operational Plan objectives and key performance measures. It covers the period from 1 July 2020 to the end of month 5 and follows on from the previous report to Board in July 2020.</p> <p>In summary:</p> <ul style="list-style-type: none"> <li>• Overall, our performance is good across the majority of business areas.</li> <li>• There have been significant issues in one business area which has led to the decision to place 'bursary appeals and related matters' into enhanced monitoring arrangements.</li> </ul> <p>We continue to progress our work to finalise an overarching framework to support our approach to performance reporting in line with audit requirements.</p>		
<b>Specific Action Required</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
<b>(please ✓ one only)</b>			✓
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• Note the performance update.</li> </ul>		

# **Integrated Performance Report September 2020-21**

## **1. INTRODUCTION**

This paper and Appendix 1 provides the Board with the regular bi-monthly update on performance to end of month 5, and for part of month 6 where available.

## **2. BACKGROUND**

The impact of the COVID-19 pandemic meant that Welsh Government modified the usual planning and performance regimes for this year, and we are now in a quarterly planning process. This report and appendices summarises performance against the Quarter 2 Operational Plan and key performance measures.

## **3. PERFORMANCE OVERVIEW**

Our overall performance continues to be good, with improvement in many areas, despite the disruption caused by COVID-19, the change to planned work programmes and implementation of new ways of working. Highlights, further analysis and the dashboard are at Appendix 1.

During this reporting period, we have identified a number of significant issues in one of our business areas which have led us to place the function into enhanced monitoring arrangements. Further details are included at Appendix 1 and have been summarised in a separate paper to Board this month. There are no other significant performance concerns to report to the Board for Quarter 2.

## **4. GOVERNANCE AND RISK ISSUES**

This report fulfils the agreement for bi-monthly performance reporting to Board. The key performance measures set out in the dashboard were agreed with Board last autumn.

During the period since our last report, we have continued with work to develop a Performance Management Framework for HEIW in line with audit and good governance expectations. We are clear that our approach needs to reflect the differences in our remit compared with those of other NHS organisations and the fact that there are few national targets of relevance to our functions. Given other urgent priorities this work has not yet been completed. This is now a priority and a draft will be available for discussion during October. The arrival of the new Director of Planning, Performance and Corporate Services on 21<sup>st</sup> September 2020 will provide much needed additional capacity and ensure this timetable is achieved.

## **5. FINANCIAL IMPLICATIONS**

There are none arising from this report.

## **6. RECOMMENDATION**

The Board is asked to note the contents of this report and appendices for assurance.

Governance and Assurance			
<b>Link to IMTP Strategic Aims</b> <i>(please ✓)</i>	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	✓	✓	✓
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
	✓	✓	✓
<b>Quality, Safety and Patient Experience</b>			
N/A			
<b>Financial Implications</b>			
There are no financial implications arising from this report.			
<b>Legal Implications (including equality and diversity assessment)</b>			
N/A			
<b>Staffing Implications</b>			
N/A			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
N/A			
<b>Report History</b>	This is the latest bi-monthly organisational performance report. The previous report was presented to Board on 30 <sup>th</sup> July 2020.		
<b>Appendices</b>	Appendix 1 – Integrated Performance Report Dashboard & dashboard		



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Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

**Health Education and Improvement Wales  
Integrated Performance Report 2020-21  
September 2020**

## CONTENTS

Introduction & Overview

Section 1: Quarter 2 operational plan objectives

Section 2: Key performance measures

Annex: Dashboard

## INTRODUCTION & OVERVIEW

This bi-monthly report provides an update on HEIW current performance to 31 August 2020, or early September where available, in delivering against the objectives set out in the Quarter 2 operational plan and the key measures in the HEIW performance dashboard (Annex 1).

Overall HEIW has continued to perform effectively during the period covered by this report. From the progress updates provided, objectives are on track to be completed within associated timeframes. The 8-10 weeks covered by this report have continued to be busy for the organisation as we look to make progress and restart a number of paused objectives, as we continue to support Welsh Government and NHS partners in response to COVID-19 and preparations for the winter and as we reach a key milestone in our significant strategic education review programme.

There have been a number of key achievements during this period that merit highlighting. These include:

- Positive fill rates overall across our medical and pharmacy pre-registration training programmes as well as higher intakes for our health professional education programmes
- The launch of the Gwella leadership portal, with immensely positive feedback from partners across the UK
- Strategic Education Review: finalisation of the draft Invitation to Tender and Contract Specification documents for consideration by ECQC and Board
- The agreement and implementation of single lead employer arrangements for the majority of trainees
- The finalisation of our first Strategic Equality Plan, in readiness for formal sign-off at September Board and publication on 1 October 2020
- The successful conclusion of negotiations with Welsh Government to secure their full recognition of HEIW's role around Apprenticeship Framework development and review.
- The smooth transfer of Safe Nurse Staffing Levels Team from Public Health Wales
- The absorption of the Widening Access agenda and agreement reached on the transfer of responsibility for TrainWorkLive campaign - both from Welsh Government to HEIW

Of significant note during this period is the decision taken during September to place one element of the business – bursary appeals and related matters – into enhanced monitoring. This is linked to the Bursary Tie In which requires students who have received the bursary to work in Wales for 2 years following graduation. This summer has seen the start of that tie in period. Whilst this has worked smoothly for the vast majority of students there are some pockets where it has been difficult to match students with jobs and this has required closer

support and monitoring. Although the tracking process for students is ongoing, this currently equates to approximately 4% of the overall cohort. The information on student bursaries, appeals and repayments should be included in the performance dashboard as it is an important indicator, and this will be factored into future reports. In the meantime, an exception report on this issue will be taken to both the EQC and Audit Committees as the information becomes clearer.

The Performance Dashboard is now annexed to this report rather than embedded in the text, in line with the approach in other NHS organisations. Explanatory narrative to accompany the dashboard is at section 2 of this report.

No new metrics have been introduced this month. There are several areas where the data remains unchanged. The reasons for this were explained in the Integrated Performance Report presented to July Board report and these have not been replicated again this time, in line with other organisations.

In terms of corporate performance, throughout this reporting period we have continued to demonstrate the resilience and agility of the organisation, again with the lowest sickness rate of all NHS Wales organisations, and some improvements in compliance rates for PADR and Statutory & Mandatory Training.

### SECTION 1: PERFORMANCE AGAINST QUARTER 2 PLAN OBJECTIVES

Our Quarter 2 operational plan was approved by Board in July and implemented.

All projects being monitored during Quarter 2 are, indicating that they are on track at 31 August 2020. Some of the key milestones for Quarter 2 have been completed and new areas of work will now be monitored during Quarter 3.

Strategic Aim 1 -To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'

**Objective 1.1:** *Lead the development of a multi-professional CPD strategy & drive improvements in current CPD activity to ensure that the existing NHS Wales workforce has the skills & capabilities required for the future.*

Progress: Whilst work to produce a CPD strategy has been paused, other deliverables have been progressed. Work has been undertaken in this period in preparation for a formal tendering and award of contract for an all-HEIW course management system in early 2021.

In addition, the steering group has been reviewing the changes made to CPD delivery and scope as a consequence of COVID-19 to ensure that the learning and innovation is harnessed and embedded into future CPD activity.

**Objective 1.2: Lead, develop and implement a sustainable national workforce plan for key shortage professional areas to achieve a better match between demand and supply in Wales.**

Progress: Whilst the activity to develop national workforce plans had been deferred to next year, work has been progressed during this period to ensure that professional shortages and 'hot spots' are identified and that we are able to support NHS partners as they plan for the winter and potential future peaks.

We have commenced a round of discussions with CEOs and Directors of Workforce & OD in each organisation to get a better understanding of their pressures and to explore opportunities for HEIW to add its support. We have worked with Welsh Government to reactivate the workforce cell of the emergency planning arrangements to get a handle on the various workforce demands arising from COVID-19 including new vaccination staff, 111 and TTP.

The additional engagement with partners during September will ensure that we are able to build their requirements into our own plans as we gear up to produce the HEIW Quarter 3 – Quarter 4 winter plan and mobilise our priority work programmes.

**Objective 1.3: Lead, develop and embed a range of actions to support workforce and workplace wellbeing and colleague experience. (National)**

Progress: During this period, we have continued to add to the health and wellbeing resources available for the NHS workforce. Together with national staff side partners, we have made progress in training and engaging colleagues across NHS Wales in the new Health Working Relationships programme, approach and policy.

The team have shared with NHS organisations the learning of the pilot Health Needs Assessment in HEIW to provide a national toolkit, which was published July 2020. We have continued to work up proposals for a national staff survey in autumn 2020, to be led by HEIW on behalf of NHS Wales. We await confirmation from Welsh Government that the Minister is content to support.

We have appointed a strategic programme lead and adviser, on secondment into HEIW for 6 months, to build the business case for a once for Wales Occupational Health Service and an independent chair for the national health and wellbeing network.

**Objective 1.4: Improve access to careers in the health and care sector in partnership with Social Care Wales**

Progress: During this period, the careers team developed a think piece on "Grow your Own pathways for the current workforce' for the Executive Team and are now currently developing this paper in more detail. In addition, following the transfer of responsibility for the Welsh Government Widening Access programme to HEIW in mid-July, the team have concentrated on meeting with project leads to develop our understanding of the funding, scope and benefits of the various inherited projects.

The team has developed a needs assessment survey in partnership with the Communications Team to be distributed to colleagues, including Careers Wales, Working Wales, DWP, Careers Development Institute, education providers, as part of their work to create a comprehensive website and social media presence. They also met with the RCN to discuss the Prince of Wales Nursing Cadet Scheme and will be presenting an options analysis to the Board shortly. They are currently developing a questionnaire to circulate to volunteering leads/managers with the HBs and Trusts to establish a baseline of current activity and understand the impact of COVID-19.

**Objective 1.5: *Develop our workforce intelligence functions to improve the quality of workforce data, planning and modelling for NHS Wales.***

Progress: The team has undertaken some impressive work this quarter, most notably with the production of a 20-year overview of NHS Wales Workforce Trends, giving a baseline in readiness for implementation of the Workforce Strategy for Health and Social Care. This is due to be presented at a forthcoming Board Development Session. The team has also importantly supported the development of a detailed BAME Risk assessment data analysis for the “COVID-19 BAME Advisory Sub-Group Risk Assessment”.

They have also met with WG and partners to learn lessons from COVID-19, reshaping the data landscape, building the case for investment and new systems. A request has been submitted to NWSSP for improved access and support from HB/Trusts in NHS Wales for access to increased fields in the NHS ESR Data Warehouse. The Team is now working on a clear case for ensuring access to a range of data to allow HEIW to fulfil its functions during Quarter 3.

During this reporting period, the team instigated partnership meetings with HIW, the GMC, the RCP and other bodies to explore the possibility of sharing data to enhance the effective improvement of data quality across ESR. They are also undertaking a review of data quality metrics with the view to report data quality issues locally and nationally.

**Objective 1.6: *Develop Education and training to support NHS organisations to improve the quality of workforce planning expertise and capability across the system.***

Progress: The team developed and implemented a six-step standardised methodology for workforce planning across health and social care and will continue to roll this training out during Quarter 3.

The team refined and rolled out the workforce planning approach for primary care as identified in the Primary Care W&OD group plan to build a support network for Practice Managers. This approach, supporting resources and the initial training via a recorded webinar, were completed in August and will be launched on the HEIW and the Primary One websites shortly.

The review and updating of current workforce planning resources and the web page links have now been reviewed and revised workforce planning webpages will be uploaded to the new website in September.

**Strategic Aim 2 -To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs**

**Objective 2.1: *Lead the development and management of a multi-professional infrastructure and strategy for Simulation Based Education***

Progress: The newly appointed Simulation Leads, from across Wales, have begun to scope best practice and consider how a simulation-based education strategy could be taken forward across Wales. During Quarter 2, attention was focussed on developing a HEIW statement on

the approach to Simulation Based Education (SBE), which has now been drafted and they are now developing a Communications plan.

Other early work includes the establishment and management of a multi-disciplinary Simulation Leads Network, with clear terms of reference to ensure robustness to the engagement and activity.

Plans are being made to showcase how simulation-based education has been used across Wales during COVID-19 and are exploring new opportunities to facilitate simulation-based learning that can then be made available on the Y Ty Dysgu learning platform, the first of which will be a webinar in October.

**Objective 2.2: *Develop an education strategy drawing on the outcome of the strategic review of health professional education & the Workforce Strategy.***

Progress: It was agreed by Board in May that the output for this objective be amended so that the focus was on producing a contract specification rather than a strategy.

The strategic education review has been a significant piece of work for the organisation since its establishment. Of note during this period has been the finalisation of:

- the procurement plan and strategy; and
- the 'Invitation To Tender' and Contract Specification

Following discussion at Executive Team w/c 7<sup>th</sup> September, these documents will be considered at the Education Quality and Commissioning Committee and Board later this month.

The team have recently recruited evaluators from across NHS Wales and internally and held a training event to ensure the nominated individuals are clear about our aims for the new contract and intentions. Engagement with partners has continued to be a key focus for the review team during this period. Further information has been provided to Board in a separate paper.

**Objective 2.3: *Lead the development and implementation of an education and training infrastructure to support the multi-professional workforce model.***

Progress: during Quarter 2, the Medical Deanery reviewed and established clear standards and job specifications for medical Training Programme Directors (TPDs). A new tariff and CPD provision for medical TPDs has been set out in a Service Level Agreement and issued to TPDs and HBs. The team is now finalising the introduction of a new appraisal process to support the roles.

Current arrangements to support learning in practice have been scoped and defined e.g. TPD for medical. A new internal group has been established to scope the baseline of current configuration and support in non-medical areas with a view to establishing a consistent approach to infrastructural support and language for medical and non-medical educators across all parts of Wales.

An internal group has been established to scope placement areas across all healthcare professions managed by HEIW. Existing approaches to quality management and quality

assurance will be reviewed to develop an overarching QM framework promoting a consistent approach.

Other key activity during this period included: working with partners to scope trainee and student placements and identify new placement opportunities in community and primary care. Also, the HEIW primary care workstream group began to engage with stakeholders and arrange a conference for October. These will enable HEIW to secure agreement to a future vision of education and training in primary care, and to agree a plan for education and training infrastructure in primary care, including standards, governance arrangements and funding approaches.

**Objective 2.4:** *Lead the development and implementation of a digital capability framework for the healthcare workforce.*

Progress: during Quarter 2, the digital team made good progress in defining and agreeing with partners the scope of and definition of 'A digital ready workforce'. This included the review of the definition internally within HEIW. The team also carried out a desktop review of approaches undertaken.

**Objective 2.5:** *Develop a plan in conjunction with Welsh Government for the future allocation of SIFT funding.*

Deferred to 2021-22.

**Objective 2.6:** *Maximise opportunities for work-based learning and apprenticeships in health.*

Progress: Colleagues have continued to progress the deliverables in relation to this objective. One of the significant developments this period has been the news that we have successfully reached agreement with Welsh Government to fully recognise HEIW's role around Apprenticeship Framework development and review. This means that HEIW will work in directly with them – they are now the Issuing Authority for Apprenticeship Frameworks - rather than through Skills for Health to get the Frameworks we need. The work will start in the autumn when WG have issued the new Health and Social Care Level 4 and 5 Frameworks. We will work directly with WG to develop and maintain a suite of health Apprenticeship frameworks and will jointly establish a Steering Group to oversee this work.

This was a key deliverable in our IMTP and so this is a big and important first step.

**Objective 2.7:** *Implement improvements to ensure equitable access to education and training for SAS and locally employed doctors.*

Paused until Quarter 3.

**Objective 2.8:** *Improve opportunities for trainees and students to undertake education and training through the medium of welsh*

Progress: this objective was paused until Quarter 3. However, a paper has recently been received by the Executive Team and will be considered at the Education Quality and Commissioning Committee in September. The paper begins to articulate how the Welsh language needs of trainees and students will be progressed by HEIW through its education commissioning functions and the new contract specification for non-medical education.

**Objective 2.9:** *Review career pathways and education opportunities for the clinical academic and research workforce.*

Deferred until 2021-22.

**Strategic Aim 3 - To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels**

**Objective 3.1:** *Lead the implementation of the Health & Care Leadership Strategy through the NHS Wales Compassionate and Collective Leadership framework for action.*

Progress: during Quarter 2, the compassionate Leadership Principles have been updated to reflect feedback from the first consultation pre-COVID-19. Significant engagement has been undertaken with NHS Peer Groups and presentations well received. The date of the relaunch of the principles is yet to be agreed with Social Care Wales, which presents a risk to progress: our aim is to agree the final set and launch by the end of September 2020.

The team commenced the review and promotion of a range of existing evidence-based culture and leadership tools aimed at creating cultures of collective leadership across organisations and teams. In June 2020, the team submitted the Leadership paper to the Executive Team with the proposed approach and a contract was subsequently awarded to The Kings Fund for a series of leadership masterclasses (virtual). Section 1 and 2 of the compassionate leadership materials developed with Prof Michael West were converted into digital resources.

The HEIW Leadership Steering Group and Graduate Programme operational Group were both established with a view to creating a network of Collective Leadership Champions to support implementation and development/use of resources.

A significant focus for the team this quarter has been the development of a Festival of Leadership and Learning, entitled 'Talentbury', which is scheduled for October 2020 as part of the arrangements to provide an annual leadership conference and learning events aimed at enabling widespread adoption of best practice.

Building on the successful work during Quarter 1, and the well-received presentation to the Council of Deans of Wales, the team have gained support to include compassionate Leadership within the undergraduate syllabus. They have provided universities with access to the compassionate leadership resources to inform curricula design via Gwella during Quarter 2. Compassionate Leadership has also been included as a specification in the education commissioning tendering process. Finally, the team launched the Manager Core Skills Modules on Gwella, sourced from the Open University.

**Objective 3.3:** *Lead the implementation and management of the Digital Leadership portal.*

Progress: the new HEIW Leadership Portal for Wales 'Gwella' was launched in Quarter 2 and has been extensively marketed across NHS Wales and partners. Links to 'Partners' have been created on Gwella to promote widely all leadership events and resources, including those developed by others. The portal can now be used for managing conference events, master classes, etc., to reach diverse audiences.

At the time of writing we have just heard that the portal and resources, including in relation to NHS workforce wellbeing, have been shortlisted for a UK award in the category of Digital Transformation alongside companies such as SKY, Network Rail and Health Education England. This is a significant achievement.

**Objective 3.4:** *Lead the establishment and management of a Wales Leadership alumni and range of leadership networks.*

Objective delayed until Quarter 3 – Quarter 4 due to capacity within team and significant progress being made with other elements of the overall programme.

**Objective 3.5:** *Lead the adaptation, development and implementation of leadership programmes and resources for clinical leaders from a range of professional backgrounds.*

Objective paused due to lack of clinical capacity to engage and capacity within the HEIW team. Will be picked up during quarter 3-4.

**Objective 3.6:** *Lead the review, improvement and re-launch of the NHS Wales Graduate training scheme.*

Progress: the team has researched best practice models to re-establish and re-launch the NHS Wales graduate leadership scheme and has developed a Graduate Programme operating Model. Approval has been secured from NHS Wales CEOs and Welsh Government on the funding model and scope, with commencement of marketing from September 2021. A detailed business case has been prepared for submission to Welsh Government to secure the funding required for future years. This will be submitted by the Director of Finance following Executive Team sign off.

The team is currently developing a marketing strategy and engagement plan to attract graduate applicants to the NHS Leadership scheme. This is being supported by the Communications Team and through partnership working with key partners including Welsh universities. The team is also developing a recruitment process and includes addressing the issue about 'permission to work'. Tender for the success Profile development is now complete.

Finally, the team are exploring opportunities to establish an HEIW internship in the following corporate areas: Finance, Planning, Workforce & OD and Communications. A proposal Paper was approved by the Executive Team in principle in July 2020 and a further paper is to be considered for final approval w/c 14<sup>th</sup> September.

#### **Strategic Aim 4 - To develop the workforce to support the delivery of safety and quality**

**Objective 4.1:** *To develop a good practice toolkit and resource guide to support the workforce model in unscheduled care.*

Progress: a new Programme Manager for Urgent and Emergency Care commenced on 1 July 2020 and is currently undertaking a significant scoping exercise to determine existing support and provision relevant to the unscheduled care workforce and to define "what is unscheduled care" and the parameters of the programme. This has included scoping 'new models' and good practice of unscheduled care from across Wales and the UK to produce an interim report

on their impact to workforce/service delivery. A project group(s) is being established to develop a good practice toolkit & resource guide to support the workforce model in unscheduled care, and initial contact has taken place with the lead Clinician in the National Collaborative for Unscheduled Care.

**Objective 4.2:** *Contribute to the workforce planning and workforce development requirements for the Major Trauma Network (MTN).*

Due to other pressures and capacity within HEIW this objective will be picked back up and our contribution reviewed in Quarter 3. The HEIW lead has continued to participate in meetings.

**Objective 4.3:** *Lead the workforce development and training requirements to support the Single Cancer Pathway.*

Progress: this continues to be a key area of focus for the organisation, in support of our NHS partners. The HEIW lead is working with colleagues in the NHS Wales collaborative structure to ensure that the needs in relation to training, education and workforce are understood. There have been some issues of clarification in relation to roles and responsibilities, which has led us to refocus our contribution and for the group we have been chairing to be split into two – education & training and workforce. As part of this shift we have also reviewed governance structures for training.

A proposal to bring the national training programme for clinical endoscopists and WIMAT into HEIW has been considered by the Executive Team and supported in principle.

The team has reviewed the actions from the National Endoscopy Action Plan in the light of COVID-19 and a series of new actions have been developed and submitted to the National Endoscopy Programme. The team has also been working to identify best practice workforce models to be adopted locally.

Work to identify national priorities for investment in extended/advanced roles across the endoscopy, imaging and pathology workforce will be led by the new Head of Science Transformation when appointed. Five nurse endoscopists were recruited to the endoscopy training programme rather than the twelve we had provided for. A second cohort is due to commence in January 2021. A review of all roles and the training programme have been undertaken in line with the COVID-19 Recovery Plan. The pandemic delayed training for the endoscopists.

**Objective 4.4:** *Develop a mental health workforce plan in collaboration with Welsh Government and Social Care Wales to support implementation of Together for Mental Health (this includes CAMHS).*

Progress: this is another key priority for HEIW, together with Social Care Wales, in support of the health and care system and as commissioned by Welsh Government. Progress this period includes the submission of a paper to the Mental Health Network Board and confirmation of the priorities and timelines for the remainder of this year. A virtual conference is being planned and the team will continue to liaise with the UK to review good practice. Arrangements to recruit a new Mental Health Programme Manager are underway.

**Objective 4.5:** *Improve post registration education, support and training pathways to ensure all health care professionals can develop beyond the point of initial registration.*

Progress: cross team working within the Nursing Directorate has ensured that links are in place with the professions with regard to the development and implementation of a learning and development framework for the Health Professional Workforce. The team has re-engaged with the service during Quarter 2 to ensure agreement with the general direction being taken via a virtual engagement event held in August. A briefing paper has been developed for the wider service to ensure communication is delivered at all levels. A proposed model has been developed and an expert working group has been established to further develop the model.

The team have been actively leading work on the introduction of new roles, such as the Anaesthesia Associate in NHS Wales, in partnership with the service. A report from the task and finish group has been completed and has been presented to the Medical Director. A business case is being developed to support training and introduction of the role within NHS Wales.

A business case to develop an all Wales strategic approach to behavioural science training has been prepared for the Executive Team to ensure a consistent approach across NHS Wales.

**Objective 4.6:** *Support implementation of primary care workforce model as part of the Strategic Programme for Primary Care (SPPC).*

Progress: A summary of progress on primary care is included in our first primary care workforce bulletin which we published earlier this month with our stakeholder briefing.

HEIW's Workforce Programme Manager is providing support to the development of workforce planning and modelling at cluster level. Work is being informed by work previously undertaken, but also by lessons learned from COVID-19, Cluster IMTP learning, and working with workforce planning leads in HBs.

The single lead employer model for Pharmacy (also dental and core medicine) trainees went live in August, which will contribute to the successful delivery of the actions around the pre-registration programme and increased numbers.

In order to develop proposals for an education/training infrastructure for primary and community care (academies/hubs), the HEIW primary care workstream group is developing plans for a stakeholder conference in October. The workstream held their first post COVID-19 meeting in early August.

The team continue to progress national frameworks and training for new roles. They have recently finalised the accredited Level 2 Primary Care Administration and Reception qualification and supporting resources. A Business Case has been developed to support structured delivery, assessment and quality assurance of work-based education and training in primary care.

A further Business Case has been developed to support rollout of Problem Based Small Learning Groups, initiation of discussions with WAST and Out of Hours (OOH) around career pathway development for Remote Consultation and Decision Making (RCDM) roles. The Level 2 Primary Care Administrative Resource (PCAR) is ready for launch but will not be released until supporting infrastructure can be determined, i.e. assessors, supervisors and verifiers. The Business Case to train assessors to support PCAR was approved and discussions are

underway for rapid rollout of training. The Practice Management and Administration resource is in design with the Digital Team and workload capacity issues have slowed progress.

The team are also working on the development of a digitally enabled compendium of good practice for primary care. They are currently working through the technical issues within the current compendium, with a view to reinstating features and defining refreshed content. In collaboration with NWSSP (where the Compendium is currently hosted), the project plan has now been agreed and NWSSP has provided project support to map existing content against roles identified within the Wales National Workforce Reporting System. Corresponding job descriptions and roles are to be matched and new case studies identified during this process.

**Objective 4.7:** *Support workforce development requirements of integrated care models being developed by Regional Partnership Boards.*

Progress: There has been limited progress on the specific deliverables contained within this objective, partly because the opportunities to engage with regional partnership boards and/or achieve clarity of the emerging models has been impacted by COVID-19. However, one of the key pieces of work to flag as noteworthy commenced as a direct consequence of our response to COVID-19 to support care homes in relation to health education and training. It is an excellent example of cross Directorate matrix working with over 20 members of staff contributing to this agenda. During Quarter 2, we established a small internal task and finish group to develop a range of options further. We established communication links with relevant external stakeholders to gather information on other organisations involved with supporting care homes (Improvement Cymru, Welsh Government and the Royal College of Nursing) and the offers, in order to avoid duplication. A paper on options to support care homes was submitted to Executive Team and the next step is to establish an internal working group to coordinate a range of actions to support this agenda.

**Objective 4.8:** *Support the implementation of the Maternity Care in Wales, A Five-year Vision for the future (2019-2024)*

This objective is to be reactivated in Quarter 4.

**Objective 4.9:** *Secure the transfer of the Nurse Staffing Programme Team to HEIW and lead the further role out of the programme across NHS Wales.*

Progress: another noteworthy event was the successful transfer to HEIW of the Nurse Staffing Programme Team, responsible for supporting NHS Wales in delivering the All Wales Nurse Staffing programme. Formerly part of Public Health Wales, the Nurse Staffing Programme team transitioned to HEIW on 1 July 2020. In addition to these staff, a Data Analyst and Mental Health Inpatient Project Lead will be recruited to the team. Programme management arrangements and accountabilities between Welsh Government, NHS Health Boards and Trusts and HEIW are being reviewed and revised and work will now continue to deliver the extension of the Act by April 2021.

**Objective 4.10:** *Assess the Critical Care workforce needs across Wales and provide a framework which allows healthcare organisations to develop their Critical Care workforce plans.*

As previously reported, this objective was refocussed to support COVID-19, with an understanding that this would remain a major focus and require our input potentially for the remainder of the year. Our contribution included creating 4 new ITU training posts at short notice in response to COVID and successfully filled all of them for August 2020. A further expansion of 4 planned for next year so we have successfully accelerated our plans to expand medical training numbers in intensive care medicine. An analysis of the critical care workforce needs has been completed and the findings used to inform recommendations within the Education and Training Plan 2021 for the medical workforce planning recommendations, to incorporate the impact of the shape of training in medicine. A review of the opportunity afforded by the contribution of Physician Associate (PA) roles within the critical care workforce has commenced with a workforce planning exercise to identify the span of current PA employment across Wales.

**NEW Objective 4.11:** Develop a plan in collaboration with Welsh Government and Social Care Wales to support implementation of the multi-professional workforce and training aspects of the Allied Health Professions Framework for Wales “Looking forward together”.

Progress: Following the appointment of the new Head of Allied Health Professional Transformation, this new objective has been added to the plan.

Engagement with service and education partners has been undertaken to identify priorities and development opportunities to optimise career pathways as part of our support with regard to Operating Department Practitioner (ODP) role development scoping. There is a requirement for centralised workforce intelligence data with regard to skills, knowledge, experience, competencies to support rapid service reconfiguration / workforce deployment. Early discussions have taken place with the service with regard to pilot sites and scope of the project and with Workforce Information Systems (WfIS) with regard to feasibility / alignment with priorities. A discussion paper is in preparation.

Work has commenced on the TUPE transfer to HEIW of the two Allied Health Professionals and Health Care Scientists Framework Implementation roles from the NHS Collaborative, which should be completed by end of Quarter 2 and anticipate commencing recruitment to vacancies in Quarter 3. The Executive Team supported the detailed plan for delivery of the transfers w/c 7<sup>th</sup> September 2020.

The team has also been developing COVID-19 Rehabilitation awareness training to support Health and Social Care professionals to adopt an 'enabling approach' to routine care after COVID-19. Content, has been piloted, disseminated and evaluated. The 'Rehabilitation is everybody's business' playlist is now undergoing accessibility assessment and translation prior to release in September 2020.

## **Strategic Aim 5 - To be an exemplar employer and a great place to work**

### **Objective 5.1: *Implement the People, Inclusion and OD Strategy.***

Progress: Virtual staff roadshows and consultation sessions took place over the summer, to revisit the original outcomes and test whether they were still fit for purpose in light of our COVID-19 experience. The sessions generated excellent feedback to inform in the revised draft People & OD Strategy. The draft Strategy will be submitted to the Executive Team by the end of September and work to finalise and then implement the plan will continue virtually in line with new timescales.

### **Objective 5.2: *Lead, develop and embed a range of actions to support workforce and workplace wellbeing and excellent colleague experience within HEIW.***

Progress: The next Health Needs Assessment survey will be run in October 2020, and a communication plan will be developed to share the results. The team continues to develop and pilot health and wellbeing information, resources and evaluation tools in HEIW prior to sharing across NHS Wales. They are currently developing a range of health and wellbeing resources. These include: the Wellbeing in Work Impact Resource (WIWIR), which will include the 9 protected characteristic of the Equality Impact Assessment; a Health Needs Assessment Template that will include the Stonewall questions; and a Health and Wellbeing Framework for NHS Wales that will include a dedicated section on identifying and providing health and wellbeing resources specifically to under-represented staff or those who are more affected not only by COVID-19, but in general.

### **Objective 5.3: *Implement and embed the Welsh Language framework within HEIW.***

Progress: During Quarter 2, steady progress has been made with the Welsh Language Commissioner on the Welsh Language Scheme. Plans are in place to go to public consultation in Quarter 3 – Quarter 4. The team has implemented the existing plan with the production of vlogs, various information pieces produced for the Intranet, the introduction of the new Welsh Language Translator, and recruitment of a new cohort of learners. The new Welsh Language Translator will significantly improve the translation services provided by HEIW and the dashboard shows an increase to internal capacity of c.50% in just two weeks.

### **Objective 5.4: *Implement and embed the HEIW Strategic Equality Plan and further develop equality and inclusion agenda including partnership working across the public sector.***

Progress: Work recommenced on the HEIW Strategic Equality Plan in July 2020 with an initial focus on reviewing objectives in light of COVID-19 and a series of internal focus groups were held as part of review. The plan was resubmitted to the Executive Team and discussed at the Board Development Session in August. The draft was well received, and a small number of amendments have been made to the document in light of feedback. The final draft will be presented for formal approval to September Board with a view to publication by 1st October 2020. Production of the Directorate actions plan will commence in October for completion by December 2020.

**Objective 5.5:** *Progress opportunities for organisational approaches to combat climate change.*

Progress: Work commenced during Quarter 2 to scope the impacts, risks, opportunities and threats from climate change over the short, medium and long term with a focus on low carbon and being more efficient with our resources. An internal stakeholder group was established to identify opportunities and challenges and an action plan is being developed. Plans are progressing to undertake a strategic assessment of energy efficiency opportunities with consultancy support from the Welsh Government Energy Service, allowing HEIW to reduce carbon emissions further.

**Strategic Aim 6 - To be recognised as an excellent partner, influencer & leader**

**Objective 6.1:** *Implementing HEIW Communications and engagement strategy; brand awareness and influencing for success.*

Progress: Implementation has continued and in some areas been accelerated in response to COVID-19 demands. In light of the pandemic and the increased workload on colleagues and the department, the planned review of the strategy review has been scaled back. Nevertheless, the team has reviewed the scope for influencing national programmes through targeted communications and engagement with regulators and politicians. Plans going forward have been agreed via the Executive Team, and targeted communications and engagement work is underway. For example, Executive Directors will be meeting a number of professional bodies, the Council of Deans for Health, and CEOs of the other 10 NHS organisations this month. Plans for the Annual General Meeting have been designed to encourage wide participation and engagement. This will be particularly important in engagement opportunities with MSs and MPs given the Welsh Government elections in May 2021.

In addition, the team have developed a forward plan of news articles / blogs etc., subject, and publication date, targeted at specific publications. Many of the projects reported here have been supported by communications plans and it is hoped that this work will continue further to maximise communications and engagement opportunities with key stakeholders.

During Quarter 2, new HEIW branding guidelines were released and have been adopted across the organisation. The 2019-20 annual report has been produced and the team has dealt with a number of enquiries from the public and partners, this included facilitating BBC Wales interviews of our Nursing and Medical Directors.

**Objective 6.2:** *Supporting HEIW business areas on key national programmes of work through the development and delivery of highly effective communications / engagement / marketing interventions.*

Progress: this objective was initially paused, but many projects have continued and have been supported by communication plans and professional input from the team (e.g. the Graduate programme; Leadership portal; Mental Health Conference; E&D Annual Plan; Careers Campaigns Support; Health Needs Assessment).

**Objective 6.3:** *Review the alignment of internal digital systems and functions, and opportunities to support the Education and training experience for trainees in Wales.*

Progress: The restoration of Eduroam following a trial period was completed during quarter 2. Eduroam is now being utilised across health board settings and accounts have been rolled out to staff in HEIW. We continue to work with NWIS to review infrastructure issues restricting the rollout of the network to additional sites and HBs. We have successfully worked with CTM HB who have now installed infrastructure to broadcast Eduroam.

During Quarter 2, an indicative new structure was developed, and staff were appointed to the Head of Digital Services and Solutions Design and Development. Work is being undertaken to revise job descriptions of E-Learning roles following resignations. The Digital Director vacancy was advertised w/c 7<sup>th</sup> September.

## SECTION 2: ORGANISATIONAL PERFORMANCE

### Education and Training Activity: Commissioned Places

The impact of the A level arrangements this year has meant some changes to training and education programmes. Whilst undergraduate medical education is not our direct responsibility, we have been integral to discussions and influencing the consideration of the revised A level assessments this year, given the links with our clear proposals and ambitions for increasing foundation training places. We continue to foster close working relationships with medical schools and were pleased to indicate our support for the increase in medical school places as a result of the revised A level outcomes.

#### Foundation Training

From August 2020 we have established 4 new foundation rotations (12 posts) – one each in BCUHB, Hywel Dda UHB, CTM UHB and ABUHB. These are innovative in that each doctor will be allocated to a general practice and spend a day a week in the same general practice for the whole year. This is the first inclusion of foundation year one doctors in general practice setting and they have been highly competed for in recruitment. (called LIFT- longitudinal integrated foundation placements- we are the only place in the UK offering them currently)

We also created priority foundation posts in Bronglais to encourage recruitment- these were advertised in advance of the main recruitment process and applicants were offered protected time and training to develop teaching skills by Cardiff University. These didn't achieve 100% fill rates but give us a good platform to develop the concept next year.

#### Secondary Care

At the end of Month 5, we have undertaken Round 1, Round 1 Re-advert and Round 2 recruitment processes. Over 99% of core training posts across Wales were filled in Round 1, which is an increase of over 5% from the previous year and up 10% from 2018. According to data published by the UK Medical and Dental Recruitment and Selection Board, Wales has also achieved the highest fill rates across the UK. The number of training posts available in Round 1 has also increased from 415 to 424. Of this 424, only three places were not filled this year across 15 different specialties, with 12 specialties achieving 100%.

In addition, Round 2 recruitment was successful in achieving an 80% fill rate (135 posts filled of 168 advertised). This is 5% lower than in the previous year but broadly comparable given the variables in the recruitment processes including the mix of specialty training posts each year. Round 2 recruitment continues, and actual fill rates will be available at the end of the year.

In totality, our current recruitment position following the completion of processes to date stands at 94%.

## GP training

For Primary Care, R1 and R1 Re-advert have been completed for posts commencing in August 2020. R2 recruitment to posts commencing in February 2021 started in July. 24 vacancies have been advertised in Wales. A total of 104 applications were received with a first choice Scheme in Wales. This is an increase from 65 applications received for R2 last year. R2 will conclude at the end of October 2020 and will be reported in November.

## Pharmacy

Pre-registration pharmacist fill rate for the 2020 intake is 83% compared with an expected rate 97%. 12 offered posts were not filled due to degree exam failures and COVID-19. Despite the rate being lower than expected, the total number of students is 38% up on 2019 and the previous fill rates of 65%.

*[Please note: the data on pharmacy fill rates in the dashboard relates to pre-registration only. This is because the 2020 figures for the other areas are not yet available. We have adjusted the 2019 rate to ensure comparability across the years. We will revert to the rate across all areas of Pharmacy in the November report.]*

The preparation and planning for the single lead employment of pharmacists, medical and dental trainees has been intense but was successfully implemented by the start of the new year. In pharmacy, the additional transformation of the delivery of the pre-registration pharmacist programme to multi-sector training has required enormous effort by the HEIW team and the training providers.

In relation to COVID-19, disruption to progression of pharmacy students has been minimal with respect to their achievement of competence to practice. Provisional pharmacists are still waiting for a date for the GPhC registration assessment. The 2020 intake to the Cardiff School of Pharmacy and Pharmaceutical Sciences has increased from a historical intake of circa 120 to 160. This is due to the A level grades being awarded on the basis of predicted grades.

## Health Professional Education

The Education and Training plan for 2020-21, approved by the Welsh Government, provides the highest number of health professional students commissioned in Wales. The increases mean that students will benefit from an expansion of opportunities including part-time and shortened programmes, distance learning programmes and opportunities for part-time nursing placements in the care home sector.

Despite COVID-19, the new conditions contracted HEI's are working under and the changes to the methodology surrounding the award of A levels, applications have remained high and, through meetings with the Universities it is anticipated commissioning levels will increase. Over the summer, HEIW led work to develop placement recovery guidelines. These were developed in light of the impact of the COVID-19 pandemic on student training to ensure that student learning continues, and their safety is at the forefront of decision-making regarding programme progression.

Students are currently commencing their courses and HEIW have planned Contract Business Meetings with Universities scheduled for October where the final commissioning fill rates for 2020/21 will be discussed. The impact of this will be reported in the November report.

The 2021/22 Education and Training Plan was submitted to Welsh Government for approval at the start of this period. An update regarding the outcome of the final decisions surrounding the Education and Training Plan 2021/22 will be highlighted in the November report.

### Continuing Professional Development (CPD) Course Activity

The dashboard shows the number of attendees at face-to-face and online CPD events for the period 1 April 2020 to 30 June 2020 compared to the same period last year. As expected, there has been a significant increase in attendees at online events, as HEIW cancelled all face-to-face events over the period. (Please note a slight discrepancy between the reporting period in 2020 compared to 2019, which is due to a change from quarterly reporting to year-to-date reporting.) The vast majority of CPD provision stems from the Pharmacy and Dental Deaneries, and RSU.

All areas postponed face-to-face events during the lockdown and have been working towards plans for CPD delivery from September 2020 onwards, all of which include a mix of face-to-face and online delivery, incorporating elements.

In Dental, owing to the risks inherent within clinical aspects of dentistry, hands-on clinical training has been severely impacted, and a detailed plan has been put in place to manage this in postgraduate centres.

In RSU, the online CPD website remains available and 3 new modules have been launched in the reporting period, increasing the number of modules from 38 to 41. As in Q1, the data shows a decrease in the number of page hits this quarter compared to the same period last year. However, we anticipated this as a direct impact of the COVID crisis and, potentially, an indirect impact of the temporary suspension of the Medical Appraisal process by the CMO on the 27 March.

RSU have also launched a new series of short CPD e-resources entitled the 'vital' session series (VSS). This series of accessible, open access resources is designed to provide bite size chunks of vital information on key topics. Our first vital resource on Trans-gender health launched in <https://ytydysgu.heiw.wales/go/qljpl3>

The Developing Doctors to Deliver (3D) programme has been re-designed to be delivered in a virtual format utilising the new HEIW Gwella portal. Applications for the next cohort have closed and the programme remains oversubscribed with 53 applications for 20 spaces in 2020/21.

In Pharmacy, there were no scheduled live CPD events, virtual or otherwise, although existing eLearning resources remained available on the website. The CPD programme of (virtual) events for Sept-Dec 20 has been cascaded across all relevant networks.

Flu training was provided for contactors wishing to deliver the NHS service, with 11 events delivered for 65 delegates during August.

For COVID-19 resources, the medicines administration module for support staff workforce in social care settings has now been completed by 584 individuals.

## Quality and Outcomes

### Quality Management

In Quarter 2, a pilot virtual visit was undertaken to a primary care setting, and this proved to be an effective means of visiting small settings. Steps are now being undertaken for virtual visits to secondary care settings during Quarter 3. Up to the end of Quarter 2 there are 6 completed or planned visits. It is expected that the number of planned visits will increase later in the year as previously postponed visits are rescheduled at an appropriate time. Remote monitoring will continue in the interim.

Quality management activity has continued throughout the pandemic albeit in a different way. Whilst active Targeted Visits were postponed during the first quarter, the need to ensure patient safety and effective learning environments has remained as important as ever. Effective relationships with Local Education Providers, (LEPs) and the GMC have been maintained. In addition to reviewing options for resuming quality management activity, key pieces of work undertaken in the current reporting period relate to concerns management, additional emergency hospitals, and regulator engagement. Further detail can be found in our Performance Report to Board of July 2020.

### GMC Trainee Survey Results

The GMC has postponed the traditional National Training Surveys in the light of the COVID-19 pandemic. However, in recent weeks a shorter survey designed to capture trainee and trainer experiences of the pandemic has been launched across the UK. The GMC has changed the operational arrangements for this particular survey thereby preventing us from tailoring publicity to individuals. However, despite this we have been able to encourage completion without creating additional pressure in difficult circumstances. The surveys closed on 12 August 2020. This was an experimental survey with a shorter completion window and, as predicted, response rates have been lower than in previous years. The final response rates for HEIW are outlined below:

- Trainee survey – 53.26% against a national average of 48.67%. HEIW's response rate was the second highest in the UK, after Defence Deanery.
- Trainer survey – 33.8% against a national average of 24.3%. HEIW obtained the highest response rate in the UK.

The GMC are currently exploring the most appropriate way to report the results.

### Annual Review of Competence Progression (ARCP)

The Annual Review of Competence Progression (ARCP), or Review of Competence Progression (RCP) in Dental Foundation Training (DFT) and Dental Core Training (DCT) (twice a year), is the formal method by which a trainee's progression through their training programme is monitored and recorded.

In late 2019-20 (and early 2020-21), for upcoming annual reviews, guidance was issued (on a four-nation basis) about panel composition, process and new outcomes to be used

should progression be impacted as a result of trainees supporting COVID-19. As a result, review panels were held online rather than face to face events. Early feedback from this indicates the revised process was well received and offers significant benefits in terms of panel availability, flexibility, time and cost. The new outcome codes and revised decision aids have been used for ARCPs conducted in the period 1 April to 31 August 2020. Work is underway to validate this year's ARCP outcomes and test reporting in preparation for the GMC report which needs to be returned by early November 2020. The final report will be run from Intrepid in late October

Where outcomes are available, they have been uploaded to Intrepid. The system is being tested and missing outcomes and queries are being addressed. There are a number of identified queries still to be dealt with for the new COVID-19 outcomes. As a result, the data is not available for the majority of the ARCPs undertaken in the period.

Interim ARCPs for DFT and DCT take place in February and March each year and were reported in the March 2020 report. Final RCPs took place in July for both programmes: 68 in DFT (66 Outcome 6s, 1 Outcome 3 and 1 Outcome 4); and 62 in DCT (61 Outcome 1 and 1 Outcome 10).

### Professional Support Unit (PSU)

At 31 August 2020, there were 317 active cases (compared to 345 at 30 June 2020). This is a drop of 28 active cases since 31 March 2020. However, as reported in July, data shows a decrease in uptake of support since the start of lockdown in March 2020 compared to the same point in previous years. This is mirrored across all four countries of the UK (as reported in the COPMeD PSU Group Meeting in June 2020), as trainees have focused on service provision.

With the restarting of the Royal College exams, the requests for exam-related support is reaching expected levels.

During Quarter 2, the PSU have also developed and delivered 8 webinars for trainees and trainers. The webinars were run in the evening to maximise attendance and included:

- ['Maintaining your Strength & Wellbeing'](#)
- ['Strengthening your Emotional Wellbeing'](#) with Dr Emma Lishman, Hammet Street Consultants Ltd
- ['Getting the most out of Mentoring \(for mentors and mentees\)' Part 1](#)
- ['Getting the most out of Mentoring \(for mentors and mentees\)' Part 2](#)
- ['Crucial conversations: Giving and receiving feedback'](#)

In response to requests for exam preparation guidance we are preparing a series of 3 webinars and a support pack for trainees. The webinars will be delivered as evening sessions (to enable maximum delegate attendance) and recorded for reference.

## Trainee Progression Governance (TPG)

The main role of TPG is to coordinate Reviews and Appeals of Annual Reviews of Competence Progression (ARCP) Outcomes (and more recently Appeals from Foundation Dentists and Appeals following removal of National Training Number, NTN). Approximately 2,500 ARCPs are held each year with a range of nationally prescribed Outcomes. Trainees prescribed Outcome 3 or Outcome 4 can Appeal. The dashboard provided data on the appeal outcomes in 2020, compared to 2019 and 2018.

In the period 1 April to 31 August 2020, we successfully conducted 2 virtual appeals.

## Medical Appraisal and Revalidation

The GP Appraisal process was suspended in March in light of COVID-19 and our GP appraisers' time was released to support Primary Care services across Wales. We have participated in four nations discussions in preparation for the recommencement of the appraisal process. Medical appraisal will recommence across all sectors in Wales on 1 October with a focus on wellbeing and support. This is in-line with Scotland and England. We have developed an operational plan to manage the recommencement, which includes training and support for our appraisers who returned from service on 1 August, as well as a communications plan for all appraisees, appraisers and HB contacts. We have also developed two new resources to provide guidance on how returning to medical appraisal can be carried out considerably and effectively with a focus on well-being and support:

- 'Returning to appraisal', developed in collaboration with Dr Rob Morgan, GP Appraiser and Vice-Chair of RCGP Wales (open access): <https://gpcpd.heiw.wales/non-clinical/returning-to-appraisal/>
- 'Guidance for virtual appraisals', developed with contributions from Dr Roger Morris, GP Appraisal Co-ordinator Cardiff, Dr Esther Youd, Appraiser Cwm Taf Morgannwg, Katie Leighton and Miriam Davies RSU: <https://gpcpd.heiw.wales/non-clinical/virtual-appraisal-guidance/>

The dashboard shows the number of appraisals completed on both MARS and the Primary Care instance of MARS, for the period 1 April – 31 August 2020 (584). The appraisal completed data is based on the date the appraisal summary is agreed, not the date of the meeting. Therefore, these completed appraisals will have taken place prior to the suspension of appraisal on the 27 March. This data is not comparable with the same period last year due to the temporary suspension of medical appraisal. Appraisals due to take place during this period are classed as an 'approved missed' appraisal, therefore affected doctors will not be due to undertake their next appraisal until 2021.

As at 31 August 2020:

- there were 140 registered on the **Dental Appraisal System (DAS) for Community Dentists**, approximately 90% of all Community Dentists;
- 669 users had registered on the **Orbit360™** system (to support doctors with gathering patient and colleague feedback), an increase of 103 compared to the previous quarter which reflects a growing increase in traffic to the site.

## Corporate Performance

### HEIW Performance Metrics

#### Workforce Movement

The HEIW headcount has risen from 417 to 435 since the last report to Board (June data). We have successfully onboarded and inducted staff whilst working from home, with positive feedback from our new employees. This includes the TUPE transfer of staff from Public Health Wales (Safe Nurse Staffing Levels Team) and secondees.

#### Turnover

The 12-month rolling turnover rate for HEIW for the period to August 2020 was 8%, an increase of 0.3% since the previous report. This is still relatively low given our newness but is at a level which continues to support business continuity and organisational memory whilst also bringing in new thinking and new ideas.

#### Sickness

HEIW continues to have the lowest sickness rate of all the 11 NHS Wales organisations, with a rolling 12-month sickness rate of 2.1% to August 2020. This is down 0.1% since the last period and significantly below the NHS Wales sickness target of 4.2%. When examined in the light of periods of organisational change and COVID-19, the current rates indicate a good degree of organisational resilience and positive health.

Short-term sickness absence makes up 29% of our total sickness absences, which is broadly consistent with the ratio over the past year. Given the overall low levels of absence, any single long-term episode has a significant impact on the overall picture within the organisation and the small number of cases that HEIW are sympathetically and appropriately managing. The most days lost to sickness have typically been for reasons of anxiety/stress, but it is worth noting that absence due to tumors/cancers is now at the same level.

#### Disciplinary & Grievance

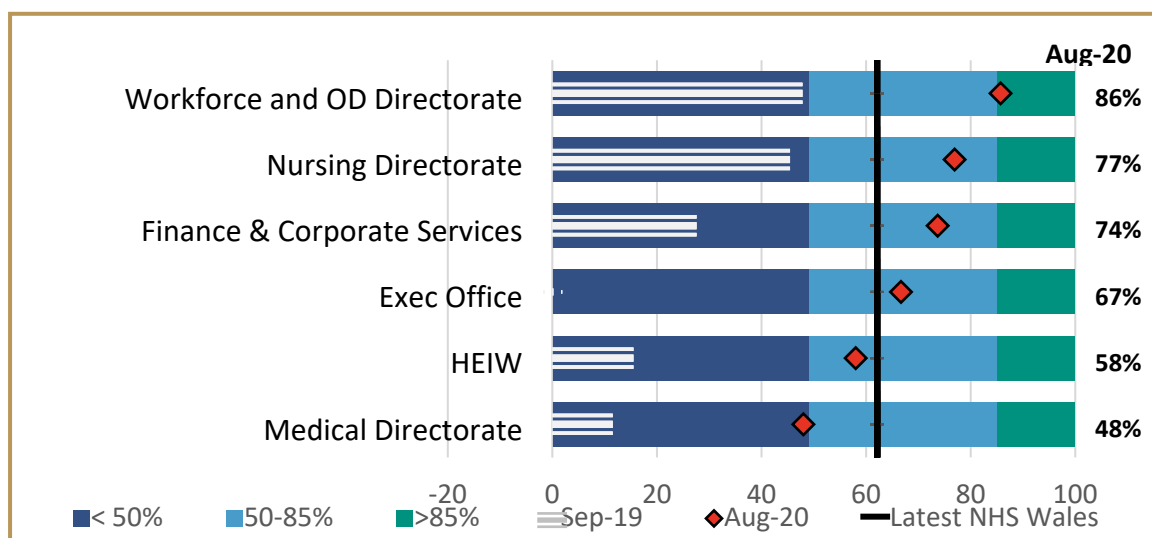
There were no disciplinarys, grievances or staff complaints in the period.

#### Personal Appraisal Development Review (PADR)

Personal Appraisal Development Review (PADR) forms part of contractual arrangements for staff and is one of the key performance indicators in the NHS Wales delivery framework set by Welsh Ministers. The target rate for PADR/Appraisal is 85% as recorded on the ESR system. This is an agreed measure, which recognises that factors such as long-term sickness, maternity leave, career breaks would mean that 100% compliance is difficult to achieve. New starters are excluded from PADR compliance figures for the first 3 months in post.

The overall compliance level for HEIW core staff (excluding GP Appraisers/Pharmacy Assessors/Facilitators whose prime employment is generally elsewhere) was 58% at end August 2020 up 5% from the end of June position and broadly in line with the level of compliance across NHS Wales. Four of our business areas are now above the NHS Wales

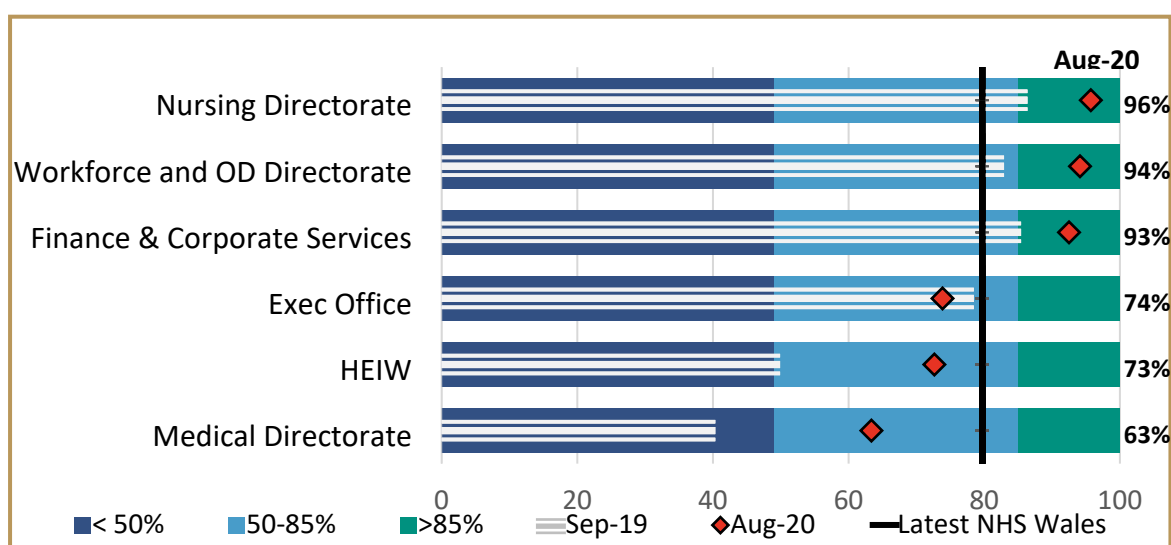
average with one achieving the target of 85%. Whilst there is still some way to go to achieve the target across HEIW, this is a positive shift from the previous report, during a period when staff have continued to work from home and also to take their summer leave. Further detail is shown in the table below.



### Statutory & Mandatory Compliance

The Welsh Government KPI requires 85% compliance at a minimum level 1 in the 10 UK Core Skills Framework for NHS Staff, hosted on the ESR system. The majority of these learning modules require a 3-year refresher period, although specific modules may differ in this. New starters are excluded from this report for the first 3 months in post.

The HEIW compliance rate for core staff (excluding GP Appraisers/Pharmacy Assessors/Facilitators) at end August 2020 was 72.38%. This represents an improvement of 2.38% since the end of year figures were reported, with three of our 5 business areas achieving in excess of 93%. However, it remains short of the 85% target figure and whilst it remains the responsibility of individual staff and managers to ensure that they achieve compliance in statutory/mandatory training requirements, the People Team and the wider Workforce & OD teams will continue to support and encourage staff in this process.



There have been positive increases in rates of statutory and mandatory training in respect of Health & Safety and Fire Safety, as well as Information Governance.

### **Equality Data**

Compliance in recording equality data has improved again since March 2020, with the compliance rate increasing to 62%, from 59% in March.

### **Welsh Language**

Compliance in compiling Welsh language data has also improved slightly since March 2020, with the rate increasing again this period to 31%.

In Q2 (July and August), over 488k words were translated, an increase of over 300% on the same period last year (when just under 144k words were translated). Just under 400k words were translated in Q1, so there is expected to be another significant increase by the end of the full quarter (July-Sept). Although there are some known peaks of work related to Board and Committee Meetings and corporate documentation, the work is otherwise still largely unpredictable, and is still growing in volume.

Our new Translation Manager joined the team in mid-August, not only doubling internal capacity, but also bringing a wealth of knowledge and expertise, which is already showing considerable cost saving and improving service levels.

### **Staff Survey & Health Needs analysis**

The data has not changed since the previous period.

### **Online communication/engagement**

Social media figures are growing as the communications and engagement team proactively promote HEIW work and engage with stakeholders.

Internally we continue to share regular COVID 19 and wellbeing related information with staff including the Samaritans wellbeing support line and COVID 19 risk assessment tool. In addition, we have been sharing a number of staff education and training sessions and opportunities for staff to get involved and inform HEIW policies and processes such as the Strategic Equality Plan and flexible working policy. Staff open forums are continuing to be held on a monthly basis attracting over 80 members of staff.

August also saw the communications and engagement team support the People team with the HEIW fun factor. A virtual event providing a few hours of light-hearted fun for staff giving them the opportunity to catch up with colleagues from across the organisation. In addition, with colleagues across NHS Wales we celebrated and showed our support for Pride 2020.

Work on the merger of the three legacy websites is progressing well. In partnership with the HEIW equality manager and colleagues from the Digital team we are arranging website and document accessibility training for staff to ensure our content is accessible to all and meets appropriate standards.

Externally, we have continued to regularly post and share COVID 19 messages and resources on social media, as well send messages directly to stakeholders such as students, trainees, trainers, employers and partners. The COVID NHS staff wellbeing resources have been moved to a new permanent home with additional resources added and promoted including

Samaritans support line. With the pharmacy team we have promoted an online area to support provisionally registered pharmacists whose permanent registration has been delayed by the COVID 19 pandemic. In addition, the Medical and Nursing Directors both contributed to a positive BBC Wales news story about the effects of Covid on healthcare students and trainees.

Work has also continued on non-COVID related programmes with the successful promotion of the new leadership portal 'Gwella', and the relaunch of Orbit360 our 360 feedback system for doctors. Further learning materials have also been shared and promoted including the bitesize online guidance for GPs, a framework supporting the career development of pharmacy technicians, as well as celebrating student successes and Pride 2020. We also celebrated our 99% fill rate for the year so far as well as promoting careers in the NHS as GCSE and A-level results were released.

The performance section of the HEIW Annual Report 2019-20 has been written and the whole report put into publication format in time for submission to Welsh Government at the end of August.

### **Finance**

HEIW has met the PSPP target of 95% for the past two months. The Director of Finance has prepared a separate report for month 5 which is on the Board agenda.

Agency expenditure has increased over the summer months as a result of resignations and unsuccessful recruitment to a handful of posts in the Digital Team, as well as the need for additional capacity across some of our priority areas.

### **Freedom of Information Requests**

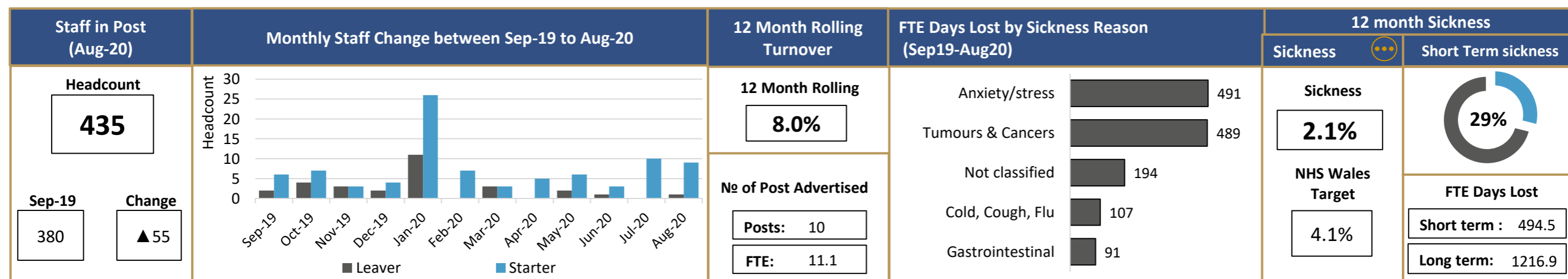
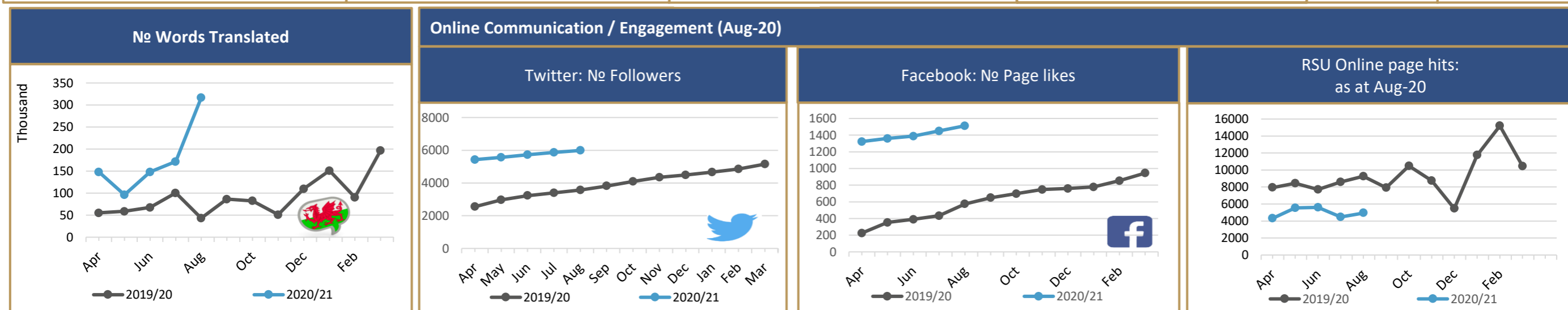
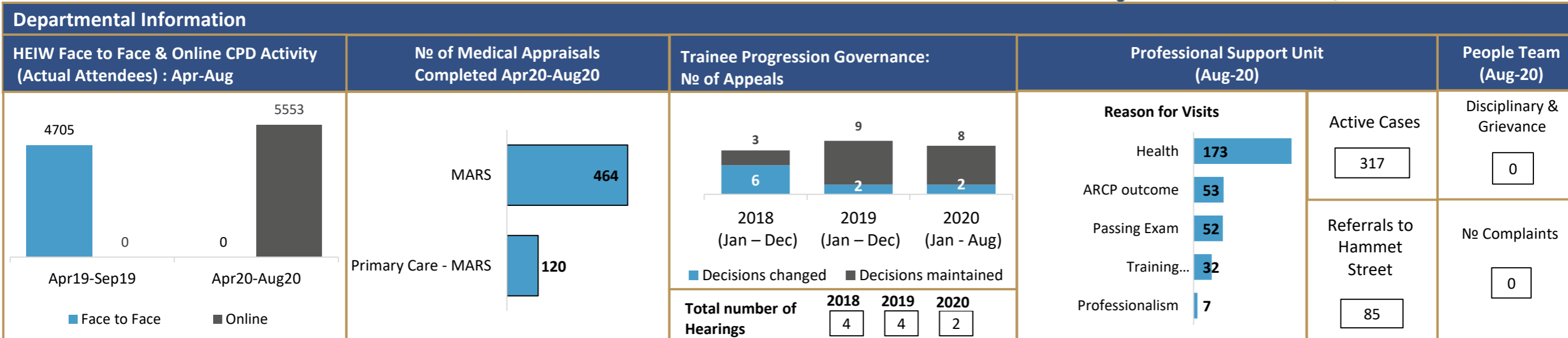
HEIW received 6 FOI requests during this period. The compliance rate (response within the 20 working days) remains at 100%. There have been no requests for review.

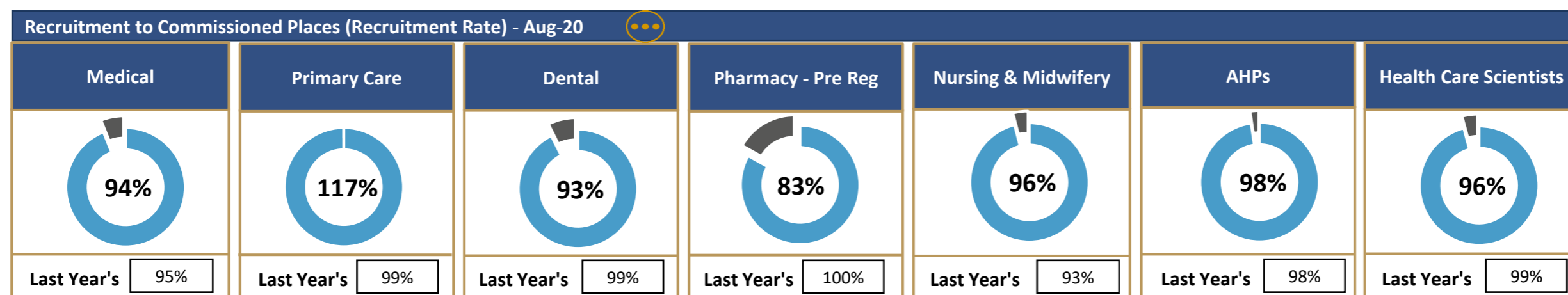
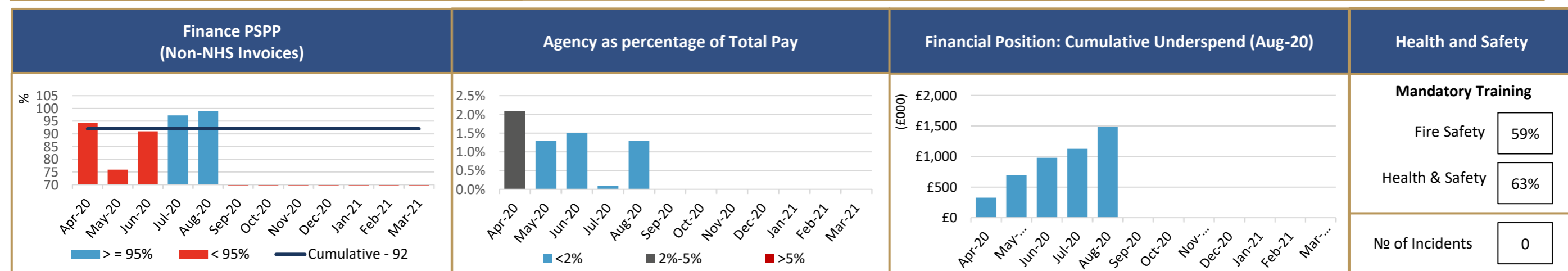
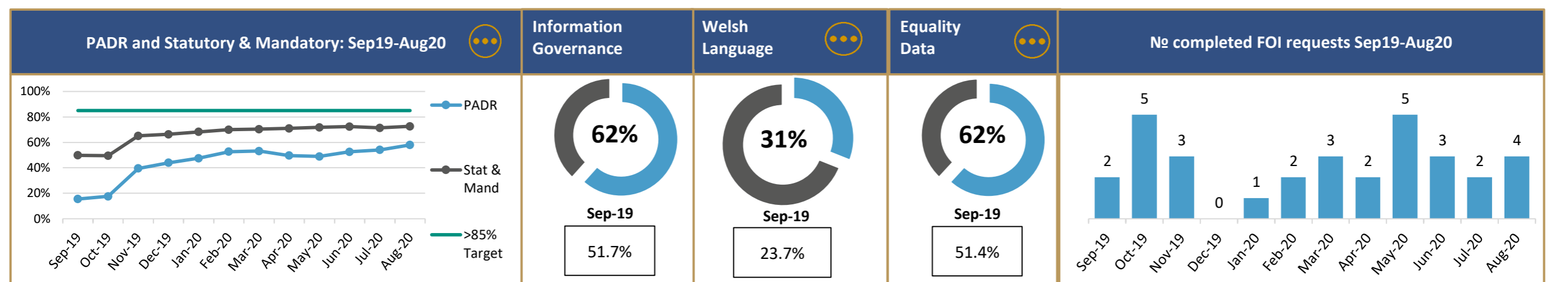
### **Accidents and Incidents**

In the period 1 April to 31 August 2020, there were no health and safety accidents, or incidents reported/recorded.

END

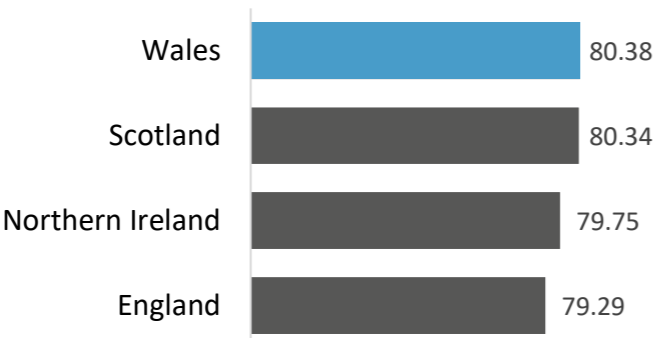
# Health Education and Improvement Wales Performance Dashboard (2020/21)



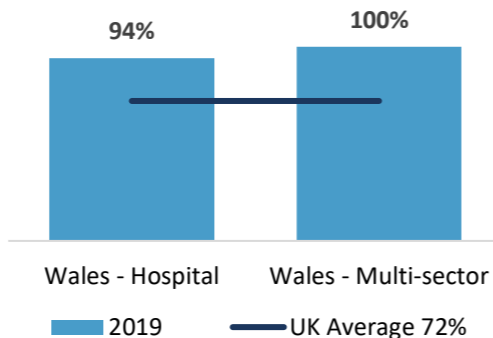


**Benchmarking Information - 2019**

**GMC National Trainee Survey - Overall Satisfaction Scores (2019)**

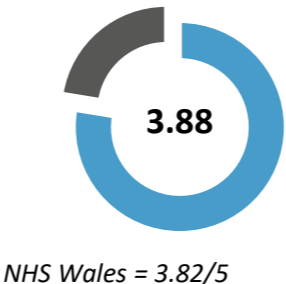


**Pre-registration trainee pharmacists - Pass rate**



**Staff Survey 2019**

**Engagement Index**



**Response Rates**

HEIW  
48%

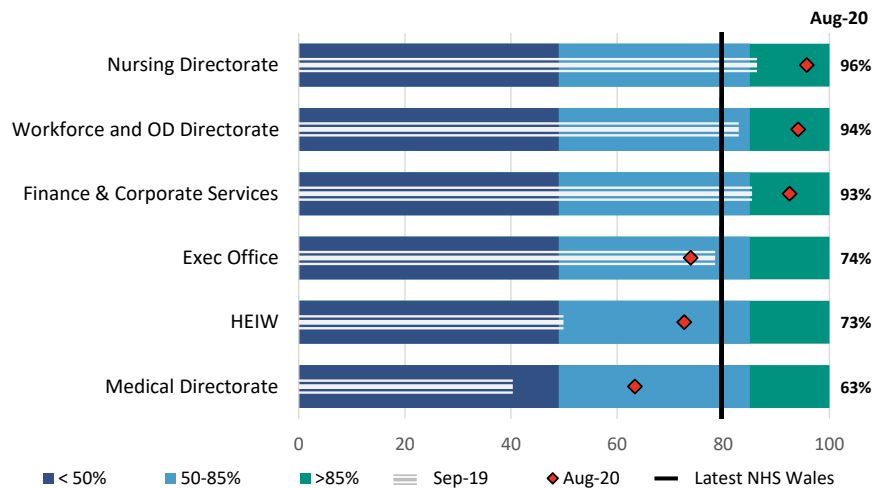
NHS Wales  
29%

**Health Needs Assessment Score 2019**

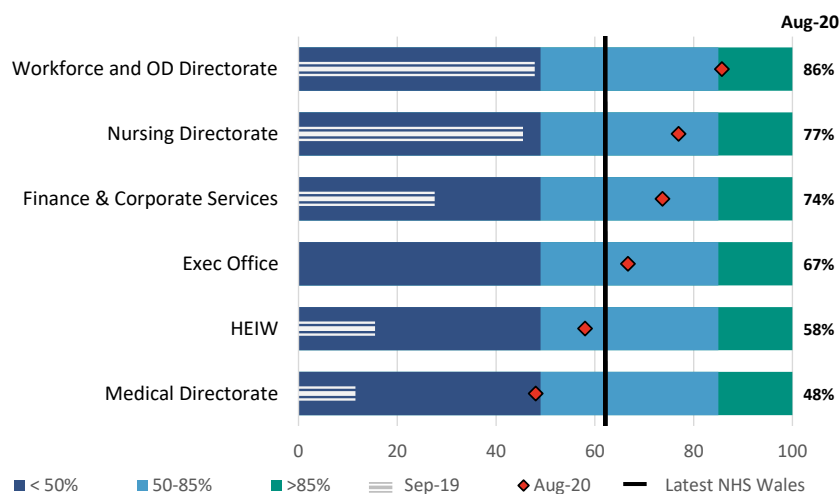
The Engagement Index (out



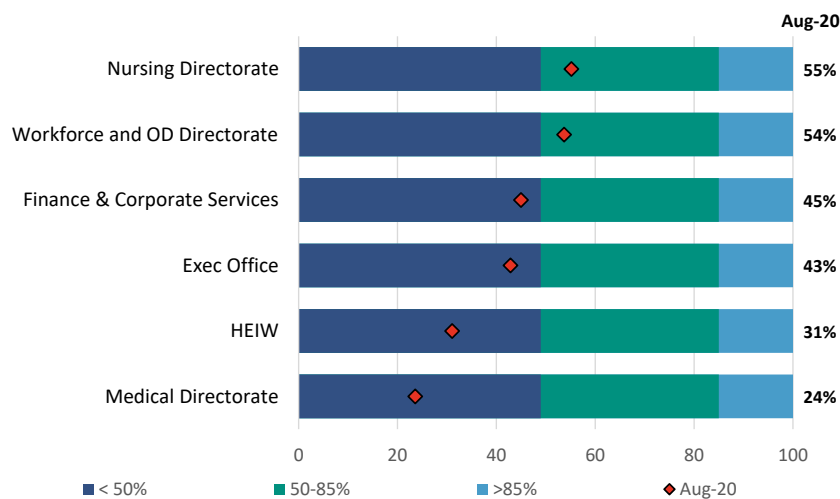
### Statutory & Mandatory Training Rates by Department: Sep-19 - Aug-20



### PADR Completion Rates by Department (Entered into ESR):

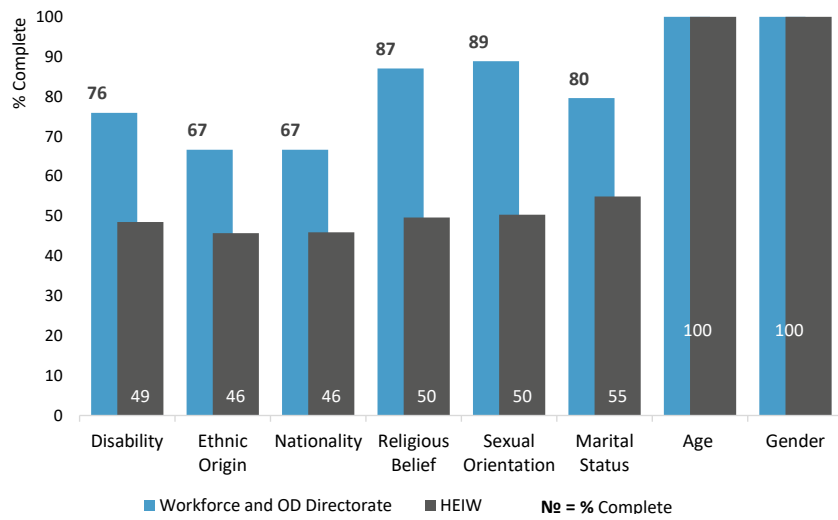


### Welsh Language Competency Completion Rates by Department for



## Individual Elements of the Equality Score as at . Comparing HEIW against Workforce and OD Directorate

Select Directorate: Workforce and OD Directorate



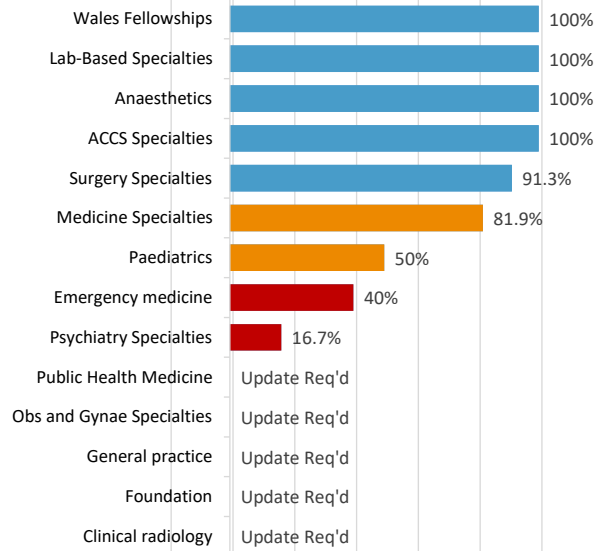
Secondary Care

Dental

Nursing, AHP & HCS

Pharmacy

## Summary of Fill Rates by Category (Aug-20)



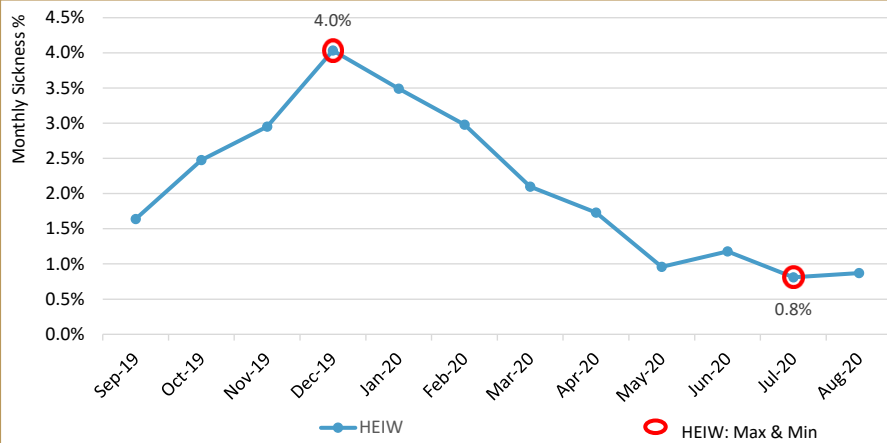
### KEY

Greater 85%

50% - 85%

Less than 50%

### HEIW Monthly Sickness Absence Trend:



The numbers shown are the most up-to-date figures (refresh over a 6 month period). The sickness figures shown in previous dashboard will be different due to managers retrospectively entering sickness

## **HEIW CORPORATE RISK REGISTER (SEPTEMBER 2020)**

Date Added	Ref (Risk Area)	Risk Description and Executive Owner	Inherent Risk			Risk Appetite	Mitigating Action	Residual Risk			RAG Status	Progress
		Details of risk If...then... impact...	Impact	Probability	Overall Score	R/A/G	Summary of action to date or proposed action to reduce risk impact or proximity – this should include a deadline or timetable for completing actions	Impact	Probability	Overall Score	R/A/G & trend	
1.  Apr 2020		<p>If additional support is not put in place in response to the impact to education and training programmes as a result of COVID-19 there will be an adverse impact on progression and outcomes for students and trainees, which will also impact on NHS workforce in the medium term.</p> <p><b>Medical Director Director of Nursing</b></p>	5	4	20	6	<p>HEIW is entering into dialogue with the regulators, Royal Colleges, Universities and other national bodies to seek alternative solutions to mitigate the impact on students and trainees.</p> <p>HEIW is also reviewing the infrastructure to establish and identify the support that will be available for students.</p> <p>We are aiming to achieve an agreement based on a 4 nation approach where possible.</p> <p>Consideration given to Virtual approach to learning competencies to be recognised.</p>	4	3	12		<p>From a Medical and Dental point of view, the ARCP process has been modified to allow trainees to progress without detriment if their progression has been hampered by COVID 19. The impact of the pandemic on student progression has been closely monitored and to date there is only one cohort of Radiography students whose programme completion (at the current time) may be delayed by 3 weeks.</p> <p>It is estimated it will be a further six months before a normal placements cycle can be resumed.</p> <p>Regarding Nursing and Midwifery, the NMC will be phasing out many of the emergency standards that came into operation early in the pandemic on 30 September 2020. This will support students returning to their normal studies and supernumerary placements. The NMC standards are facilitative rather than directive which means Wales can choose to return to normal ahead of that date. The NMC have identified a number of emergency programme standards which will be retained as recovery standards. These facilitative standards include removal of the 12-week rule, and adoption of the Standards for Student Supervision and Assessment. The NMC are also recommending flexibility in how theoretical instruction is given, moving from distance to blended learning as university campuses begin to reopen.</p>

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3. Apr 2020	2	If there is a delay in recruiting to PGME rotations this may create a workforce problem for the NHS in the medium term.  <b>Medical Director</b>	4	4	16	6	HEIW to ensure all alternatives are explored to minimise impact on recruitment processes.  4 nation agreement and contingency planning being developed. Foundation trainees are being deployed to obtain key skills in medicine as required by their programme. In other specialties additional training time will be required in these key areas. This will be managed through revisions to programme management over the coming months.	1	1	1		Recruitment has been undertaken Different discriminating methods to allow for selection have been developed  No longer a risk

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4. Apr 2020	3	If current pressures affect the major change programmes relating to GP Trainee and Pharmacy Pre reg programme there is a risk to delivery, and impact on future workforce increases in the medium term  <b>Medical Director</b>	4	4	16	6	HEIW to protect resources to maintain these programmes. Maintain regular updates on progress	3	3	9		Alternative digital methods of training are being implemented across Primary Care. PEER group discussion, small group case discussions. Online Prospective Trainer course being developed to improve trainer capacity – awaiting Health Boards response to launching this.

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5. Apr 2020	4	<p>If HEIW does not re-assess its IMTP and Quarterly Plans in the context of COVID-19 it will not be able to re-allocate resources to provide the necessary support to the NHS workforce during the crisis and fail to manage expectations in respect of the IMTP objectives.</p> <p><b>All Executive Team</b></p>	4	4	16	6	HEIW identified and paused the objectives within its IMTP in Q1 in the light of the challenges posed by COVID-19.	3	1	3		The decision to pause elements of the IMTP was implemented in Q1. This enabled resources to be re-allocated to support the NHS workforce during this period.

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8. Apr 2020	8	If HEIW does not ensure that all reasonable steps are taken in respect of cyber security it may be vulnerable to a data breach, possible fines from the Information Commissioner's Office and associated bad publicity.  <b>Board Secretary</b>	5	5	25	6	This requires the implementation of recommendations highlighted within HEIW's Cyber Security assessment report.  This includes the recruitment of a Head of Cyber Security.	5	4	20		The recommendations within HEIW's Cyber Security assessment report have or are being implemented.  The new Head of Cyber Security joined HEIW on 29 June and has commenced working on a new Cyber Security Implementation Plan.

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9. Apr 2020	5	<p>If the pharmacy preregistration cohort and GP trainees are not able to progress at the end of their programmes due to exit exams being cancelled, there could be financial consequences for HEIW.</p> <p><b>Medical Director</b></p>	3	4	12		<p>This has already been highlighted by the HEIW Director of Finance with WG and the magnitude of the financial risk has been identified.</p> <p>We are awaiting input from the Pharmacy Regulator (GPhC) for details of a possible temporary Register for these individuals which would allow progression to post registration roles</p> <p>Capacity for parallel training to be implemented for both Pharmacy and GP trainees a period is being identified.</p>	2	1	2		<p>GP exams will take place on time as new approach adopted.</p> <p>There will be a postponement in the Pharmacy preregistration exam</p> <p>GPhC has introduced a provisional Register which allows those who have completed their pre-registration year to practice under certain conditions. Those individuals at risk have either been found suitable employment or found extensions to their training which HEIW have funded at a modest cost.</p>

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10. May 2020	1.	<p>The suspension of routine dentistry and the suspension of aerosol producing procedures in response to COVID-19 is affecting dental training processes both in undergraduate and postgraduate arenas. This will affect when, and, how dental students and foundation dentists gain the relevant level of experience in order to qualify, and therefore contribute to the NHS workforce.</p> <p><b>Medical Director</b></p>	4	4	16		<p>The matter is being considered at a 4 nations level to ensure a co-ordinated response. Changes to the training programmes will be developed. This will include:</p> <ul style="list-style-type: none"> <li>• Mandatory clinical skills test before starting on patients</li> <li>• Redirection of training programme based on contract reform principles</li> <li>• Front loading of Simulation and classroom elements of training from Sept 2020- Jan 2021</li> <li>• Practical clinical elements of training to be undertaken in later in the training programmes</li> </ul>	3	3	9		<p>Undergraduates were not prevented from qualifying in 2020. They have progressed to Foundation across the UK.</p> <p>The majority of Foundation trainees had gained sufficient competencies to progress.</p> <p>All of our Core Training and Specialist Training posts have been filled</p> <p>The risk for next year remains though Dentistry has recommenced with appropriate protection.</p>

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11. July 2020		<p>If there is a second or multiple peaks of COVID-19 and HEIW does not re-assess its Quarterly Plan it will not be able to re-allocate resources to provide the necessary support to the NHS workforce during the crisis and fail to manage expectations in the delivery of its objectives.</p> <p><b>All Executive Team</b></p>	4	4	16		HEIW has undertaken a review and pause of its IMTP objectives in Q1 and lessons learnt from this process are to be captured and utilised going forward.	4	3	12		

Date Added	Ref (Risk Area)	Risk Description and Executive Owner	Inherent Risk			Risk Appetite	Mitigating Action	Residual Risk			RAG Status	Progress
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12. July 2020		<p>If HEIW is unable to access workforce data from other NHS organisations then its workforce will not be able to provide modelling data and fail to meet expectations in respect of the same and have an adverse impact on NHS workforce planning.</p> <p><b>Director of workforce and Organisational Development</b></p>	4	3	12		<p>HEIW to request access to live data from ESR and other workforce information systems as well as the current Data Warehouse information</p> <p>Requests for additional access to information in line with NHS Digital/Health Education England.</p>	4	2	8		<p>Discussions with Welsh Government and NWSSP to take place to understand the remit and responsibilities for each organisation.</p> <p>Data access discussions with NWSSP in progress</p>

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13. July 2020		<p>If HEIW does not have sufficient capacity this may have an impact on the delivery of IMTP and Quarterly Plan Objectives and result in a failure to deliver agreed commitments and levels of performance.]</p> <p><b>Director of workforce and Organisational Development</b></p>	4	4	16		Assessment and costing of workforce requirements made as part of the development of the IMTP plans	4	2	8		Quarterly plans reviewed and monitored to assess delivery trajectories and inform revisions/mitigation

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14.  July 2020		<p>If the commissioning process for the Strategic Review of Health Professional Education does not meet the timescale and future aspirations, as agreed by HEIW, this will impact on the suitability and quality of education in the future.</p> <p><b>Director of Nursing</b></p>	5	3	15		<p>Ensure robust project management arrangements are in place</p> <p>Secure additional resource for the project</p> <p>Ensure robust stakeholder engagement</p> <p>Ensure it links to the 10 year health and social care strategy.</p>	4	1	4		<p>Project plans are in place, with a revised timetable in response to COVID 19, and on target to undertake the procurement of health professional education.</p> <p>Engagement with HEI and HB/Trusts currently underway and a further stakeholder event focused on the pricing strategy is scheduled for July 2020. Stage 2 of the Review is currently being scoped.</p> <p>7/9/20 – Final stakeholder event to take place on 11/9/20. All documentation has been completed to go out to the market following Exec and Board agreement– residual risk has been substantially reduced</p>

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15. Aug 2020		<p>If there are insufficient employment opportunities available for graduating AHPs and HCS students who have opted into the bursary tie in the investment in education for these students may be lost.</p> <p>Director of Nursing</p>	3	5	15		<p>A deep dive has been undertaken to examine underlying reasons for employment shortages and the bursary appeals process that releases/enforces students from their bursary responsibilities. The outcome of which are the following mitigating actions –</p> <ul style="list-style-type: none"> <li>Enhanced monitoring of available posts and bursary appeals</li> <li>Engagement with WoDs and DoFs to highlight the gap between commissioning requests and employment opportunities.</li> </ul>	3	3	9		Enhanced monitoring and conversations with service proceeding

Date Added	Ref (Risk Area)	Risk Description and Executive Owner	Inherent Risk			Risk Appetite	Mitigating Action	Residual Risk			RAG Status	Progress
		Details of risk If...then... impact...	Impact	Probability	Overall Score	R/A/G	Summary of action to date or proposed action to reduce risk impact or proximity – this should include a deadline or timetable for completing actions	Impact	Probability	Overall Score	R/A/G & trend	
16. Aug 2020		<p>If there is an increase in cases of COVID 19 that impacts on 'usual' service delivery there may be disruptions to placement opportunities for students thereby impacting students ability to progress or graduate in their professions. This in turn will impact the workforce with shortages that may have a long term effect on service delivery.</p> <p><b>Director of Nursing</b></p>	4	3	12		<ul style="list-style-type: none"> <li>Continuation of the mapping of cohort/programme delays</li> <li>Supporting Eps and service to implement HEIWs placement recovery principles</li> <li>Continuous engagement with regulators, EPs and CoDs to ensure continuity of education.</li> <li>Placement recovery principles.</li> </ul>	3	3	9		The Directorate is in continuous conversations with regulators, Eps and CoDs

## Risk Scoring Matrix

L I K E L I H O O D	Probable	5	10	15	20	25
	Likely	4	8	12	16	20
	Possible	3	6	9	12	15
	Unlikely	2	4	6	8	10
	Rare	1	2	3	4	5
		Negligible	Minor	Moderate	Major	Critical
		IMPACT				

Level	Colour	Score Range
Low		1 – 6
Moderate		7 – 14
High		15 – 25

### ***Risk Appetite Levels***

<b>Appetite Level</b>	<b>Described as:</b>	<b>What this means</b>
<b>None</b>	Avoidance of risk and uncertainty is a key organisational objective.	Avoidance of loss is key objective, play safe, avoidance of developments. Priority for tight controls and oversight.
<b>Low</b>	Minimal, or as little as reasonably possible, is preferred for ultra-safe delivery options that have a low degree of inherent risk and only for limited reward potential.	Prepared to accept the possibility of very limited financial loss if essential. Win any challenges re compliance. Innovations avoided unless essential.
<b>Moderate</b>	Cautious is preferred for safe delivery options that have low degree of inherent risk and may only have limited potential for reward.	Prepare to accept some possibility of some financial loss. Limited tolerance for sticking neck out. Tendency to stick with status quo, innovation in practice avoided unless really necessary
<b>High</b>	Open and willing to consider all potential delivery options and choose while also providing an acceptable level of reward (and Value for Money).	Prepared to invest for return & minimise the possibility of financial loss. Value and benefits considered. Gains outweigh adverse consequences. Innovation supported.
<b>Very High</b>	Seek and be eager to be innovative and too chose options offering potentially higher business rewards (despite greater inherent risk). Or also described as mature and confident in setting high levels of risk appetite because controls, forwards scanning and responsiveness systems are robust.	Investing for best possible return & acceptance of possibility of financial loss. Chances of losing any challenge are real and consequences would be significant. Desire to break the mould. High levels of devolved authority – management by trust not control.



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<b>Meeting Date</b>	<b>24 September 2020</b>	<b>Agenda Item</b>	<b>4.3</b>
<b>Report Title</b>	<b>Corporate Risk Register (CRR)</b>		
<b>Report Author</b>	Kay Barrow, Corporate Governance Manager		
<b>Report Sponsor</b>	Dafydd Bebb, Board Secretary		
<b>Presented by</b>	Dafydd Bebb, Board Secretary		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	To provides an overview of the risks currently detailed within the Corporate Risk Register.		
<b>Key Issues</b>	<ul style="list-style-type: none"> <li>• The report provides an update on the Corporate Risk Register (CRR), which is attached at Appendix 1.</li> <li>• The CRR confirms: <ul style="list-style-type: none"> <li>- one 'red' status risk;</li> <li>- eight 'amber' status risks;</li> <li>- four 'green' status risks.</li> </ul> </li> </ul>		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			✓
<b>Recommendations</b>	The Board Team is asked to: <ul style="list-style-type: none"> <li>• <b>Note</b> the contents of the report for assurance purposes.</li> </ul>		

# CORPORATE RISK REGISTER

## 1. INTRODUCTION

The Board is asked to note the current position regarding the Corporate Risk Register (**Appendix 1**) as outlined in this report.

In Q1, the Corporate Risk Register was primarily aligned to the risks created by the COVID-19 pandemic. As HEIW adapted to working in the 'new normal', the Executive Team carried out a 'Deep Dive' of the Corporate Risk Register on 9 July and aligned it to the objectives set out in the IMTP Operational Plan for 2020/21 and any other areas of inherent risk.

## 2. ASSESSMENT

There are currently **13** risks on the Corporate Risk Register. These risks have been assessed as follows: **one** 'red' status, **eight** 'amber' status and **four** 'green' status. With the exception of paragraph 2.1 the below commentary highlights the changes to the CRR over the last month.

### 2.1 Red Risks

- **Risk 8** – If HEIW does not ensure that all reasonable steps are taken in respect of cyber security it may be vulnerable to a data breach, possible fines from the Information Commissioner's Office and associated bad publicity.

**Mitigation:** The recommendations within HEIW's Cyber Security assessment report have or are being implemented. The new Head of Cyber Security joined HEIW on 29 June and has commenced working on a new Cyber Security Implementation Plan.

### 2.2 Risk with an Increased Score

There are no risks with an increased score since the last report.

### 2.3 Risk with a Reduced Score

- **Risk 14** - If the commissioning process for the Strategic Review of Health Professional Education does not meet the timescale and future aspirations, as agreed by HEIW, this will impact on the suitability and quality of education in the future.

**Mitigation:** Ensure robust project management arrangements are in place. Secure additional resource for the project. Ensure robust stakeholder engagement. Ensure it links to the 10-year health and social care strategy.

**Assessment:** Project plans are in place, with a revised timetable in response to COVID 19, and on target to undertake the procurement of health professional education.

Engagement with HEI and HB/Trusts undertaken focused on the pricing strategy. Stage 2 of the Review is currently being scoped. The final Stakeholder Event to take place on 11/09/20. All documentation has been completed to go out to the market following Executive and Board agreement. Based on these mitigating actions the residual risk has been substantially reduced and assessed as a 'Green' status.

## 2.4 Risks Removed

No risks have been removed.

## 2.5 New Risks

There are two new risks:

- **Risk 15** - If there are insufficient employment opportunities available for graduating AHPs and HCS students who have opted into the bursary tie in the investment in education for these students may be lost.

**Mitigation:** A deep dive has been undertaken to examine underlying reasons for employment shortages and the bursary appeals process that releases/enforces students from their bursary responsibilities. The outcome of which are the following mitigating actions –

- Enhanced monitoring of available posts and bursary appeals
- Engagement with WoDs and DoFs to highlight the gap between commissioning requests and employment opportunities.

**Assessment:** Enhanced monitoring and conversations with service proceeding. Based on the mitigating actions the residual risk has been assessed as an 'Amber' status.

- **Risk 16** - If there is an increase in cases of COVID 19 that impacts on 'usual' service delivery there may be disruptions to placement opportunities for students thereby impacting students ability to progress or graduate in their professions. This in turn will impact the workforce with shortages that may have a long term effect on service delivery.

**Mitigation:** Continuation of the mapping of cohort/programme delays. Supporting Eps and service to implement HEIWs placement recovery principles. Continuous engagement with regulators, EPs and CoDs to ensure continuity of education. Placement recovery principles.

**Assessment:** The Directorate is in continuous conversations with regulators, Eps and CoDs. Based on the mitigating actions the residual risk has been assessed a an 'Amber' status.

## 3. GOVERNANCE AND RISK ISSUES

Risk management through the Corporate Risk Register is a core tool for the governance of risk within HEIW.

#### 4. FINANCIAL IMPLICATIONS

Risk management through the Corporate Risk Register is a core function of HEIW as a Special Health Authority. There are no anticipated additional cost implications.

#### 5. RECOMMENDATION

The Board is asked to:

- **Note** the contents of the report for assurance purposes.

Governance and Assurance			
Link to IMTP strategic aims (please ✓)	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
		✓	
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
<b>Quality, Safety and Patient Experience</b>			
The Corporate Risk Register is the core tool to ensure effective risk management within HEIW. A robust approach to the management of risk is more likely to impact favourably on the safety and experience of patients and staff.			
<b>Financial Implications</b>			
Risk management is a core function of HEIW as a Special Health Authority. There are no anticipated additional costs.			
<b>Legal Implications (including equality and diversity assessment)</b>			
N/A			
<b>Staffing Implications</b>			
There are no additional staffing implications.			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
The Corporate Risk Register is HEIW's core tool to manage risk going forward.			
<b>Report History</b>	The Risk Register is presented to the Executive Team and SLT on a monthly basis. The Audit and Assurance Committee review on a quarterly basis.		
<b>Appendices</b>	Appendix 1 – Corporate Risk Register		



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<b>Meeting Date</b>	<b>24 September 2020</b>	<b>Agenda Item</b>	<b>4.4</b>
<b>Report Title</b>	<b>Replacement of specific sections of the Statutes and Ordinances with equivalent NHS Wales policy(ies) covering Disciplinary, Capability, Grievance and Dignity at Work</b>		
<b>Report Author</b>	Julie Rogers Deputy CEO, Director of Workforce and OD		
<b>Report Sponsor</b>	Julie Rogers		
<b>Presented by</b>	Julie Rogers		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	To seek the Board's approval for the replacement of specific sections of the Statutes and Ordinances with relevant NHS Wales/HEIW policies		
<b>Key Issues</b>	<p>The Board has previously supported the commencement of discussions with staff and trade unions to remove the statutes and ordinances and replace them with NHS equivalents.</p> <p>The discussions have concluded with positive outcome.</p> <p>The Remuneration and Terms of Service Committee indicated its support for implementation of the change at its meeting in August 2020.</p>		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			✓
<b>Recommendations</b>	Members are asked to <b>approve</b> the implementation as set out in this paper.		

# **REPLACEMENT OF SPECIFIC SECTIONS OF THE STATUTES AND ORDINANCES WITH EQUIVALENT NHS WALES POLICY(IES) COVERING DISCIPLINARY, CAPABILITY, GRIEVANCE AND DIGNITY AT WORK**

## **1. BACKGROUND**

The Statutes and Ordinances represent a set of documents which include the framework (the Statutes) and the processes (Ordinances) that provide for dealing with issues of conduct, capability and grievance in respect of some Cardiff University staff who TUPE'd into HEIW in October 2018. In general, the processes are the same/similar to the corresponding processes under the NHS Wales/HEIW policies but there are some exceptions and also some features which mitigate against their use within HEIW. For reference the relevant sections it is proposed to replace are:

- Statutes  
Statute XV specifically PART III, PART IV, PART V, PART VI
- Ordinances  
Ordinance 12

The Statutes and Ordinances form part of the contracts of employment of TUPE'd Cardiff University staff on the CU grades of 5 and above. Ordinarily, TUPE protects transferred contractual conditions for an indefinite period, however, if there is no detriment in changing or removing elements of TUPE'd terms and conditions then it is permissible to re-negotiate such terms after 12 months have elapsed since the transfer.

## **2. CASE FOR CHANGE & PROCESS**

The Board approved the commencement of discussions with staff and Trade Unions earlier in the year on grounds that this was in the best interests of affected staff and the organisation.

In order to comply with TUPE Regulations and adopt a fair and transparent process, the proposal has been fully consulted on with both Trade Unions and staff. After an extension to the consultation period to clarify the proposal and the rationale, no issues of concern were raised by staff during the consultation. The proposal has been agreed at the Local Partnership Forum and was discussed and endorsed at the RATS Committee in August 2020.

## **3. PROPOSAL**

The proposal is to replace Statute XV – PARTS III, IV, V & VI and Ordinance 12 with the following NHS Wales/HEIW adopted policies:

- All Wales Capability Policy
- All Wales Dignity at Work Process
- All Wales Grievance Policy
- All Wales Disciplinary Policy

#### 4. GOVERNANCE AND RISK ISSUES

The movement to the NHS policies mitigates risk by ensuring the future application of fairer and more manageable processes.

#### 5. FINANCIAL IMPLICATIONS

There are no financial implications.

#### 6. RECOMMENDATION

The Board is asked to approve the implementation of the changes outlined in this paper.

Governance and Assurance			
<b>Link to IMTP strategic aims</b> <i>(please ✓)</i>	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
		✓	
<b>Quality, Safety and Patient Experience</b>			
No implications			
<b>Financial Implications</b>			
There are no additional funding implications.			
<b>Legal Implications (including equality and diversity assessment)</b>			
No legal implications.			
<b>Staffing Implications</b>			
No staffing implication.			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
<b>Report History</b>	Previous Board and RATS Committee papers		
<b>Appendices</b>	None		



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<b>Meeting Date</b>	<b>24 September 2020</b>	<b>Agenda Item</b>	<b>4.5</b>
<b>Report Title</b>	<b>Review of Membership of Board Committees</b>		
<b>Report Author</b>	Kay Barrow, Corporate Governance Manager		
<b>Report Sponsor</b>	Dafydd Bebb, Board Secretary		
<b>Presented by</b>	Dafydd Bebb, Board Secretary		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	This paper presents the outcome of a review undertaken by the Chair of the membership of the Audit & Assurance Committee (A&AC) and Education, Commissioning & Quality Committee (EC&QC).		
<b>Key Issues</b>	<p>The tenure of the existing membership of the A&amp;AC ceases at the end of September 2020 and Committee members reappointments need to be considered and approved.</p> <p>The reappointment of the members of the EC&amp;QC is to be brought forward to September 2020 so that the appointment date for this Committee is aligned with the A&amp;AC.</p> <p>That the membership of each Committee, as further detailed within the proposal, be increased to provide further resilience and capacity.</p>		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			<b>Approval</b> ✓
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>Approve</b> the reappointment of the existing A&amp;AC and EC&amp;QC members, as detailed within the proposal, for a further one-year term.</li> <li>• <b>Approve</b> the new members to the A&amp;AC and the EC&amp;QC as outlined within the proposal for a period of one year.</li> <li>• <b>Approve</b> the appointments of the Chairs of the A&amp;AC and the EC&amp;QC as detailed within the proposal for a period of one year .</li> <li>• <b>Approve</b> the appointments of the Vice Chairs of the A&amp;AC and the EC&amp;QC as detailed within the proposal for a period of one year .</li> </ul>		

# REVIEW OF MEMBERSHIP OF BOARD COMMITTEES

## 1. INTRODUCTION

This paper presents the outcome of a review undertaken by the Chair of the membership of the Audit & Assurance Committee (A&AC) and Education, Commissioning & Quality Committee (EC&QC).

## 2. BACKGROUND

As a consequence of the COVID-19 Pandemic, the Chair supported by the Board Secretary have undertaken a governance review of the membership of the Board's Committees. The Chair has also met with each of the Independent Members as part of their annual appraisal process and considered the Members' backgrounds and areas of interest and expertise.

## 3. PROPOSAL

In order to provide further resilience and to increase the capacity to the Board's Committees, it is proposed that the Board confirm the following appointments:

- **Audit & Assurance Committee**

Chair:	Gill Lewis (re-appointment)
Vice Chair:	John Hill-Tout (re-appointment)
Members:	Dr Ruth Hall (re-appointment)
	Dr Heidi Phillips (new appointment)

- **Education, Commissioning & Quality Committee**

Chair:	Dr Ruth Hall (re-appointment)
Vice Chair:	Tina Donnelly (re-appointment)
Members:	Ceri Phillips (new appointment)
	Dental Dean (Professor David Thomas – new appointment)
	Pharmacy Dean (Professor Margaret Allan – new appointment)
	Postgraduate Medical Dean (Dr Tom Lawson – new appointment)

Deputy Member: Gill Lewis (re-appointment)

## 4. GOVERNANCE AND RISK ISSUES

Good governance practice is to regularly review committee membership to support appropriate scrutiny and assurance arrangements.

## 5. FINANCIAL IMPLICATIONS

There is no direct financial impact associated with the proposals.

## 6. RECOMMENDATION

- **Approve** the reappointment of the existing A&AC and EC&QC members, as detailed within the proposal, for a further one-year term.
- **Approve** the new members to the A&AC and the EC&QC as outlined within the proposal for a period of one year.
- **Approve** the appointments of the Chairs of the A&AC and the EC&QC as detailed within the proposal for a period of one year.
- **Approve** the appointments of the Vice Chairs of the A&AC and the EC&QC as detailed within the proposal for a period of one year .

Governance and Assurance			
Link to IMTP strategic aims (please ✓)	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
			✓
<b>Quality, Safety and Patient Experience</b>			
Ensuring the Board carries out its business appropriately through its Committees and aligned with its standing orders is a key factor in the quality and experience of students and trainees.			
<b>Financial Implications</b>			
There is no direct financial impact associated with the proposals.			
<b>Legal Implications (including equality and diversity assessment)</b>			
It is essential that HEIW complies with its Standing Orders.			
<b>Staffing Implications</b>			
There is no direct staffing impact associated with the proposals.			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
No direct long-term implications.			
<b>Report History</b>	Membership of the A&AC and the EC&QC is reviewed by the Board on an annual basis.		
<b>Appendices</b>	None		



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<b>Meeting Date</b>	<b>24 September 2020</b>	<b>Agenda Item</b>	<b>4.6</b>
<b>Report Title</b>	<b>Committee Chair's Report – Education, Commissioning and Quality Committee</b>		
<b>Report Author</b>	Kay Barrow, Corporate Governance Manager		
<b>Report Sponsor</b>	Dafydd Bebb, Board Secretary		
<b>Presented by</b>	Ruth Hall, Chair		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of the report is to outline discussions undertaken by the Education, Commissioning and Quality Committee.		
<b>Key Issues</b>	<p>This report focuses on the key issues raised at the Education, Commissioning and Quality Committee meeting held on 16 September 2020.</p> <p>The Board is asked to note the summary from the Chair for assurance.</p>		
<b>Specific Action Required</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			✓
<b>Recommendations</b>	<p>Members of the Board are asked to:</p> <ul style="list-style-type: none"> <li>• <b>note</b> the report for Assurance.</li> </ul>		

## **Committee Chair's Report – Education, Commissioning and Quality Committee**

### **1. INTRODUCTION**

The purpose of the report is to provide an update on matters considered by the Education, Commissioning and Quality Committee. The Board is asked to note the summary report from the Chair.

### **2. BACKGROUND**

The Board will be aware that three committees have been established under HEIW's standing orders: the Audit and Assurance Committee; the Remuneration and Terms of Service Committee and the Education, Commissioning and Quality Committee. Each committee will present reports to the Board during the course of the year outlining key discussions, issues and risks discussed during meetings.

### **3. REPORT FROM COMMITTEE CHAIR**

The Board is asked to **receive** and **note** the Education, Commissioning and Quality Committee Chair's summary of the meeting held on 16 September 2020.

The recommendations made by the Committee in relation to the Health Professional Education Contracts are considered by the Board today under a separate agenda item.

### **4. GOVERNANCE AND RISK ISSUES**

Any governance risks and issues are managed via the committee meetings and exception reports will be provided to the Board by the respective chairs.

### **5. FINANCIAL IMPLICATIONS**

There are no financial implications for the Board to consider/approve.

### **6. RECOMMENDATION**

Members of the Board are asked to:

- **note** the content of the report for assurance.

<b>Governance and Assurance</b>			
<b>Link to IMTP strategic aims</b> (please ✓)	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
<b>Quality, Safety and Patient Experience</b>			
Ensuring the Board carries out its business appropriately through its Committees and aligned with its standing orders is a key factor in enabling the quality, safety and experience of patients receiving care.			
<b>Financial Implications</b>			
No financial implications for the Board to be aware of.			
<b>Legal Implications (including equality and diversity assessment)</b>			
It is essential that the Board complies with its standing orders, which includes receiving updates from its committees.			
<b>Staffing Implications</b>			
No staffing implications for the Board to be aware of.			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
The report outlines work undertaken by the Committee to advise and assure the Board in relation to education, education commissioning and quality management of education provision and contracts. The Committee governance structure aims to identify issues early to prevent escalations; work closely with the Audit and Assurance Committee and integrate into the overall Board arrangements.			
<b>Report History</b>	This report shall be a standing item on the Board's agenda.		
<b>Appendices</b>	Chair's summary – Education, Commissioning and Quality Committee (Appendix 1).		

## Appendix 1

Meeting Date	24 September 2020	Agenda Item	4.6.1
Freedom of Information Status	Open		
Reporting Committee	Education, Commission and Quality Committee		
Report Author	Kay Barrow, Corporate Governance Manager		
Chaired by	Ruth Hall		
Lead Executive Director(s)	Angela Parry and Professor Pushpinder Mangat		
Date of last meeting	16 September 2020		
Summary of key matters considered by the committee and any related decisions made:			
<p>Due to the restrictions imposed by the Welsh Government as a result of the COVID-19 Pandemic, HEIW was unable to hold its Education, Commissioning &amp; Quality Committee on 2 July 2020 in public. However, following due process, the meeting took place via Skype/Teleconference.</p> <p>The Committee considered in detail the final procurement proposals in relation to the <b>Health Professional Education Contracts</b>. The Strategic Review of Health Professional Education Phase 1 seeks to secure pre-registration health professional education for Wales for the next 7 to 10 years. The programme of work has been an opportunity to undertake a whole system review of the shape and focus of the current education and training provision; consider the education specifications and programmes required to support the NHS in Wales going forward; and taking into account lessons learnt as a result of COVID 19 with the increased use of virtual technology in place of face to face teaching.</p> <p>The Review Programme included work carried out by KPMG involving extensive stakeholder engagement and research of international best practice. The key emerging principles from the review align with 'A Healthier Wales'; the new Workforce Strategy for Health &amp; Social Care and HEIW's Strategic Aims and Objectives. These key components have been included within the new contracts in order to ensure innovation and delivery of high-quality education provision. The contracts also facilitate partnership working within health and social care. However, concerns were raised regarding the interprofessional and blended learning and the need to reflect this more explicitly within the covering report.</p> <p>The Review supported the approach to the Lotting Strategy, which enhanced widening access to education and training to provide increased opportunities for students from all parts of Wales, and moves away from one supplier provision, where viable. Some concerns were expressed about the capacity and resources within universities to meet the delivery requirements. The Committee was reassured that the Strategy had been based on the findings from the Strategic Review Programme.</p> <p>The Committee raised questions in relation to the pricing model and the financial implications of a fixed fee per student, noting that enhancements would be paid to those education providers who meet certain criteria to widen access and</p>			

encourage educational attainment. The financial approach was consistent with the Welsh Government's emerging policy "A More Equal Wales – Commencing the Socio-economic Duty". Prior to agreeing the financial model, the education providers had been consulted on the approach to setting a fixed fee. The analysis of projections and cost benefits needed to be made more explicit within the covering report.

Concerns were raised in relation to attrition and the way it had been articulated within the documentation. This needed to be made more explicit in terms of how it was to be monitored and challenged. The governance arrangements within the contract specification, which detailed the requirement for three contract business meetings each year to review the finance, performance and quality for each provider, needed to be made more explicit within the covering report.

The Committee queried the membership of the Evaluation Panel and the potential for conflicts of interest. Whilst there were processes in place for the appointment of appropriate Panel members in terms of declaring interests and potential conflicts, this needed to be made explicit within the covering report. The Committee felt that due to variation in standards across the UK that the Panel needed to consist of academics and representatives from across the four nations.

The Committee queried the digital element within the evaluation at 5% and questioned whether there would be challenge on this percentage level.

The requirement for the Board's inclusion in the governance arrangements needed to be more explicit in the covering report.

Subject to the amendment of the documentation for the Board to reflect the Committee discussion, the Committee agreed to:

- Endorse the plan and procurement strategy;
- Recommend submission of the ITT and Contract Specification to the Board;
- Recommend to the Board that the Procurement Report be submitted to the Director of Procurement Services in NWSSP and the Welsh Government.

The Committee was pleased to see measures taken to strengthen **Welsh Language Provision within the Health Professional Education Contract Specification** aimed to create an environment that will support providers in the provision of Welsh language education and enhance the Welsh language skills of the future NHS workforce.

The Committee considered the revised **Terms of Reference** for the two new Advisory Groups - Multi-Professional Quality and Education Group (MPQEG) and Education Advisory Group (EAG). A number of changes were approved and it was agreed that each of the new Advisory Groups would review their Terms of Reference at their inaugural meetings.

**Key risks and issues/matters of concern of which the Board needs to be made aware:**

Following the Committee's consideration of the final procurement proposals in relation to the **Health Professional Education Contracts**, subject to the

amendment of the documentation to reflect the Committee discussion, the Committee agreed to:

- Endorse the plan and procurement strategy, for consideration by the Board;
- Recommend submission of the ITT and Contract Specification to the Board;
- Recommend to the Board that the Procurement Report be submitted to the Director of Procurement Services in NWSSP and the Welsh Government.

**Delegated action by the Committee**

N/A

**Main sources of information received**

- Health Professional Education Contracts
- Welsh Language provisions within the Health Professional Education Contract Specification
- Terms of Reference - Multi-Professional Quality and Education Group (MPQEG) and Education Advisory Group (EAG).

**Highlights from sub-groups reporting into this committee**

N/A

**Matters referred to other Committees**

N/A



**GIG**  
CYMRU  
**NHS**  
WALES

Addysg a Gwella Iechyd  
Cymru (AaGIC)  
Health Education and  
Improvement Wales (HEIW)

<b>Meeting Date</b>	<b>24 September 2020</b>	<b>Agenda Item</b>	<b>4.7</b>
<b>Report Title</b>	<b>Matters Reported In-Committee</b>		
<b>Report Author</b>	Kay Barrow, Corporate Governance Manager		
<b>Report Sponsor</b>	Dafydd Bebb, Board Secretary		
<b>Presented by</b>	Dafydd Bebb, Board Secretary		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	To set out key issues discussed at the In-Committee Board Meeting held on 30 July 2020.		
<b>Key Issues</b>	In accordance with Standing Orders, HEIW is required to report any decisions made in private session to the next available public meeting of the Board. The report sets out the decisions made by the Board In-Committee on 30 July 2020.		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
	✓		
<b>Recommendations</b>	Members are asked to: <ul style="list-style-type: none"> <li>• <b>Note</b> the report for information.</li> </ul>		

## DECISIONS MADE DURING THE IN-COMMITTEE BOARD MEETING HELD ON 30 JULY 2020

### 1. INTRODUCTION

The purpose of the report is to report on items considered by the in-committee Board meeting held on 30 July 2020.

### 2. BACKGROUND

The Board shall conduct as much of its formal business in public as possible. There may be circumstances where it would not be in the public interest to discuss a matter in public. In such cases, the Chair (advised by the Board Secretary where appropriate) shall schedule these issues accordingly and require that any observer withdraw from the meeting. In doing so, the Board shall resolve:

*“that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest”*

In these circumstances, when the Board is not meeting in public session it shall operate in private session, formally reporting any decisions taken at the next meeting of the Board in public session.

### 3. GOVERNANCE AND RISK ISSUES

The following items were discussed in the **in-committee meeting of the HEIW Board on 30 July 2020**:

- **Chair’s Report** – The Board received and noted a verbal update from the Chair.
- **Key Issue Reports from the Chair of the Audit & Assurance Committee Closed Sessions** – The Board received and noted the Chair’s key issue reports on the Audit & Assurance Committee Closed Sessions held on 23 June 2020 and 16 July 2020 for assurance purposes.
- **Key Issue Report from the Chair of the Remuneration & Terms of Service Committee** – The Board received and noted the Chair’s key issue report on the Education, Commissioning & Quality Committee Closed Session held on 2 July 2020 for assurance purposes.

### 4. FINANCIAL IMPLICATIONS

There are no financial implications in noting the update. However, any resource implications would have been detailed in the original requests for ratification.

### 5. RECOMMENDATION

Members are asked to **note** the report for information.

<b>Governance and Assurance</b>			
<b>Link to IMTP strategic aims</b> (please ✓)	<b>Strategic Aim 1:</b> To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	<b>Strategic Aim 2:</b> To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	<b>Strategic Aim 3:</b> To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	✓	✓	✓
	<b>Strategic Aim 4:</b> To develop the workforce to support the delivery of safety and quality	<b>Strategic Aim 5:</b> To be an exemplar employer and a great place to work	<b>Strategic Aim 6:</b> To be recognised as an excellent partner, influencer and leader
	✓	✓	✓
<b>Quality, Safety and Patient Experience</b>			
Ensuring that the Board and its Committee make fully informed decisions is dependent on the quality and accuracy of the information presented and considered by those making decisions. Informed decisions are more likely to impact favourably on the quality, safety and experience of patients and staff.			
<b>Financial Implications</b>			
There are no direct resource implications related to this report. However, any resource implications would have been detailed in the original requests for ratification.			
<b>Legal Implications (including equality and diversity assessment)</b>			
There are no legal implications contained within this report. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.			
<b>Staffing Implications</b>			
There are no direct implications on workforce in this report. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.			
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>			
There are no direct implications on the Act. However, specific impact, where relevant, will have been considered within individual reports referenced within this update.			
<b>Report History</b>	This report is provided at each meeting of the Board.		
<b>Appendices</b>	None.		